

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Mar 20 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morikam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L26927** (8)
1. Corporation Name:
BOARDWORKS OUTDOOR ADVERTISING COMPANY, INC.



Principal Place of Business		Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
12445 LAKEVIEW DR DADE CITY FL 33525 US		14502 N DALE MABREY SUITE 302 TAMPA FL 33618-2072 US		10/31/1989	06/24/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21. State, Apt. #, etc.	26. State, Apt. #, etc.	59-3060100	Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23. Zip	28. Zip	<input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Country	29. Country	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>
25. Country	30. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
ROBERTS, LAWRENCE A. JR 12445 LAKEVIEW DR DADE CITY FL 33525		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	14502 N. DALE MABREY
		83. City	SUITE 302
		84. City	TAMPA
		85. Zip Code	FL 33618-2072

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE		DATE	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	N/A
STREET ADDRESS		1.3 STREET ADDRESS	P.O. BOX 67
CITY-ST-ZIP		1.4 CITY-ST-ZIP	SAN ANTONIO, FL 78206
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the holder of trust, empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  x 2/26/97 x 352.567.4212
DATE: 2/26/97 DATE OF FILING: 3/20/97

CR2E034 (9/96)