

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90007 013 ***150.00

DOCUMENT # L26927

1. Entity Name

BOARDWORKS OUTDOOR ADVERTISING COMPANY, INC.

Principal Place of Business

Mailing Address

3005 PEACHTREE ROAD NE
 STE 100-A
 ATLANTA GA 30305
 US

2720 COLONIAL DR. NE
 TUSCALOOSA AL 35404-2560
 US

000401



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3060100

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SANFORD, BLAIN
14502 N DALE MABRY
STE 302
TAMPA FL 33618-2072

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: VP
 NAME: ESTES, WARREN
 STREET ADDRESS: 2350 PENDLETON DR
 CITY-ST-ZIP: SUWANEE GA 30024 Delete

TITLE: P
 NAME: ROBERTS, LAWRENCE A JR.
 STREET ADDRESS: 27 ROANOKE AVE
 CITY-ST-ZIP: ATLANTA GA 30305 Delete

TITLE: S
 NAME: JUNKIN, MARTHA
 STREET ADDRESS: 2720 COLONIAL DR. NE
 CITY-ST-ZIP: TUSCALOOSA AL 35404 Delete

TITLE: Delete

TITLE: Delete

TITLE: Delete

TITLE: Change Delete

TITLE: Change Delete

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TITLE: Change Delete

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TITLE: Change Delete

13. I 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 report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Martha Junkin* (MARTHA JUNKIN) 1/17/00 (205) 593-9424
 SIGNATURE AND TYPED, OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #