2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000096505

Current Principal Place of Business:

Entity Name: OAKLEY SIGNS & GRAPHICS, INC.

FILED Jan 18, 2009 Secretary of State

550 S. NORTHLAKE BLY ALTAMONTE SPRINGS			
Current Mailing Address:		New Mailing Address:	
550 S. NORTHLAKE BLY ALTAMONTE SPRINGS			
FEI Number: 05-0584924	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
LEVITT, KENNETH D		LEVITT, KENNETH D VP S	

New Principal Place of Business:

550 S. NORTHLAKE BLVD. - SUITE 1000
ALTAMONTE SPRINGS, FL 32707 US

550 S. NORTHLAKE BLVD. - SUITE 1000
ALTAMONTE SPRINGS, FL 32701 US

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: KENNETH LEVITT 01/18/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete () Change () Addition LEVITT, SCOTT M PRES Name: Name: 550 S. NORTHLAKE BLVD, SUITE 1000 Address: Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: Title: VD Title: () Change () Addition () Delete Name: LEVITT. BRETT M VP Name: 550 S. NORTHLAKE BLVD, SUITE 1000 Address: Address: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: City-St-Zip: Title: Title: STD () Delete STD (X) Change () Addition

 Name:
 LEVITT, KENNETH D S T
 Name:
 LEVITT, KENNETH D VP S T

 Address:
 550 S. NORTHLAKE BLVD, SUITE 1000
 Address:
 550 S. NORTHLAKE BLVD, SUITE 1000

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32701
 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32701

Title: VD () Delete Title: () Change () Addition

 Name:
 LEVITT, KEITH R VP
 Name:

 Address:
 550 S. NORTHLAKE BLVD, SUITE 1000
 Address:

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32701
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETH LEVITT VP 01/18/2009