

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.**  
**AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996



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

**FILED**

36 MAY -1 AM 2:31

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



DOCUMENT # **V03542 (0)**

1. Corporation Name  
**R & W SIGNS, INC.**

Principal Place of Business: **9470 ULMERTON ROAD #5C LARGO FL 33771**  
 Mailing Address: **9470 ULMERTON ROAD #5C LARGO FL 33771**

3. Date Incorporated or Qualified: **12/27/1991**  
 3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business: **21 9470 ULMERTON RD**  
 Suite, Apt #, etc: **22 UNIT 5C**  
 City & State: **23 LARGO, FL**  
 Zip: **24 33771** Country: **25 PINELLAS**  
 Mailing Address: **26 9470 ULMERTON ROAD**  
 Suite, Apt #, etc: **27 UNIT 5C**  
 City & State: **28 LARGO, FL**  
 Zip: **29 33771** Country: **30 PINELLAS**

4. FEI Number: **59-3099285**  
 5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
 6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
 8. This corporation has liability for intangible tax under s. 199.03, Florida Statutes:  Yes  No

**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

**RYALS, ROBERT**  
**9470 ULMERTON ROAD #5C**  
**LARGO FL 33771**

81 Name: **RYALS, ROBERT**  
 82 Street Address (P.O. Box Number is Not Acceptable): **9470 ULMERTON ROAD,**  
 83 **UNIT 5C**  
 84 City: **LARGO** FL 85 Zip Code: **33771**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, this 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**

Signature of officer or director of corporation (attach the appropriate form)

(If FEI) Registered Agent's signature (attach when required)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>RYALS, ROBERT</b>	1.2 NAME	
STREET ADDRESS	<b>3251 GARRISON RD</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PALM HARBOR FL 34683</b>	1.4 CITY-ST-ZIP	<b>900001870989</b>
TITLE	<b>M</b> <input type="checkbox"/> DELETE	2.1 TITLE	<b>-06/21/96-01037-017</b>
NAME	<b>HATCHER, WANDA</b>	2.2 NAME	<b>****200.00 ****200.00</b>
STREET ADDRESS	<b>3251 GARRISON RD</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PALM HARBOR FL 34683</b>	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	

*W. Hatcher*

**REMITTED BY MAY 1**

SIGNATURE: *W. Hatcher*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**W. HATCHER - MANAGER**

6-17-96 813-586-1328

CR2E034 (3/96)