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

2. Principal Place of Business

Sulte, Apt. #, etc.

City & State

Zip

SIGNATURE

12.

TITLE

NAME

21

23

24



DOCUMENT # J27378

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Principal Place of Business	Mailing Address	
8307 RIDGE RD. NEW PORT RICHEY FL 34668	6307 RIDGE RD. NEW PORT RICHEY FL 34668-6745	

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 PROFIT FLORIDA DEPARTMENT OF STATE			FILED Jun 09 1997 8:00am			
CÔF	RPORATION (1)		. Mortham			
MANN	JAL REPORT 1997	7.7	y of State ORPORATIONS	Secreta	ary of State	
•	MENT # J27378 TDOOR LAMP COMPANY,			4 1301110 0410 4404 10400 14404 14414 13241 13414	Glific Arthol Alian Alian Gliffi Arthr (Aze	
cipal Piac	e of Business	Mailing Address				
RIDGE RE		6307 RIDGE RD. NEW PORT RICHEY FL 346	68-6745			
				 Date Incorporated or Qualified 08/06/1986 	3a. Date of Last Report 05/01/1996	
rincipai P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		59-2718835 5. Certificate of Status Desired	Not Applicable \$8.75 Additional	
City & Stat	6	City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees	
Zip	Country 25	28 Zip	Country 30	Trust Fund Contribution 8. This corporation has liability for in Florida Statutes		
	9. Name and Address of Curre SH, FRANK		81 Name 12	10, Name and Address of New Re		
	to the provisions of Sections 607.050 egistered agent, or both, in the State	02 and 607.1508, Florida Statute o of Florida, Such change was a	83 84 City s, the above-named coruthorized by the corpora	SON poration submits this statement for the ption's board of directors. I hereby accept	FL 85 710 Code 34600	
agent. f.a NATURE	m familiar with, and according		PRESIDENT	- 	1-24-97	
		ent and tille if applicable (NOTE ID DIRECTORS	Registered Agent signature requ	neo when reinstaling) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTORS IN 12	í
ET ADDRESS	PVT BALISH, FRANK 12221 CIDERMILL LANE BAYONET POINT FL	DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		Change Addition	120 120
ST-ZIP ET ADDRESS	D BAROODY, TERRANCE A. 4180 COALTAL HIGHWAY	DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		Change Addition	_
ST-ZIP	ST. AUGUSTINE FL	DELETE	2. 4 CHY-S1-ZIP 3.1 THLE		Change Addition	
ET ADDRESS ST-ZIP			3.2 NAME 3.3 STHEET ADDRESS 3.4. CITY-ST-ZIP			
ET ADDRESS		DECETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS		Change Addition	
ST-ZIP		DELETE	4.4 CHY-ST-ZIP 5.1 TITLE 5.2 NAME		Change Addition	
					1	
T ADDRESS ST-ZIP		DELETE	5.3 STREET ADDRESS 5.4 City - St - Zip 6.1 Tille 6.2 NAME		☐ Change ☐ Addition	

1-24-97 813.848-1134

12221 CIDERMILL LANE STREET ADDRESS 1.3 STREET ADDRESS BAYONET POINT FL 14 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 2.1 TITLE BAROODY, TERRANCE A. NAME 2.2 NAME 4180 COALTAL HIGHWAY STREET ADDRESS 2.3 STREET ADDRESS ST. AUGUSTINE FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 51 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST - ZIP DELETE TITLE 61 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS 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 excurate and that my signature shall have the same legal effect as it made under eath; that I am an officer or director of the corporation or the resolver or trustee 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 interchange with an address.