3-15-04; 3:14PM;DOUGLAS DOUGLAS FARN

FILED
Apr 16, 2004 8:00 am
Secretary of State
04-02-2004 90039 027 ***158.75

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000017236

1. Entity Name
FL - LITES, INC.

Principal Place of Business	Mailing Address
PO BOX 9270 FLEMING ISLAND, FL 32006 US	PO BOX 9270 FLEMING ISLAND, FL 32006 US

03152004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
1814 Colonial DR.	1814 Colonial DR
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Green Cove Springs, FL	City & State: Green Cove Springs, FL
Zip: 32043 Country: USA	Zip: 32043 Country: USA

4. FEI Number: 75-3106916 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name: Louise D. Sabotin
Street Address (P.O. Box Number is Not Acceptable): 1814 Colonial DR.
City: Green Cove Springs FL Zip Code: 32043

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Louise D Sabotin 4-13-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RICE, LISA K 5627 PICNIC ROCK LANE RALEIGH, NC 27613	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Joseph J. Sabotin 1814 Colonial DR Green Cove Springs, FL 32043	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Joseph J. Sabotin 1814 Colonial DR Green Cove Springs, FL 32043	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph J. Sabotin, Pres Joseph J. Sabotin 3-15-04 904 284-7369
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #