

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N0100000483

**Entity Name:** POWER AND LIGHT PRODUCTIONS OF WAUCHULA, INC.

**Current Principal Place of Business:**

3365 US 17 SOUTH  
BOWLING GREEN, FL 33834

**Current Mailing Address:**

P.O. BOX 97  
WAUCHULA, FL 33873

**FEI Number: 59-3699077**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

GRAHAM, MICHAEL R  
3365 US 17 SOUTH  
BOWLING GREEN, FL 33834 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name VASQUEZ, TINO  
Address P.O BOX 378  
City-State-Zip: ZOLFO SPRINGS FL 33890

Title PD  
Name GRAHAM, MICHAEL R  
Address P.O BOX 97  
City-State-Zip: WAUCHULA FL 33873

Title VPD  
Name BONE, JOHN NEAL  
Address P.O. BOX 1161  
City-State-Zip: WAUCHULA FL 33873

Title STD  
Name CALDER, KATHY M  
Address PO BOX 847  
City-State-Zip: ARCADIA FL 34265-0847

Title DIRECTOR  
Name BEE, JIM  
Address 1279 CARDINAL RD  
City-State-Zip: WAUCHULA FL 33873

Title ASST. TREASURER, DIRECTOR  
Name VASQUEZ, NANCY  
Address 1009 N 8TH AVE  
City-State-Zip: WAUCHULA FL 33873

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MICHAEL R. GRAHAM**

**PRES**

**04/24/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date