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Feb 24, 1999 8:00 am
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02-24-1999 90163 009 ****70.00

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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 752503

1. Corporation Name

VISIBLE LIGHT, INC.

Principal Place of Business

**5912 JASON ST
ORLANDO FL 32809**

Mailing Address

**5912 JASON ST
ORLANDO FL 32809**



2. Principal Place of Business

21 1317 SOUTH PARK AVE

Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

3. Date Incorporated or Qualified

05/15/1980

4. FEI Number

59-2017075

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

**FUSCO, DOMENIC
5912 JASON ST
ORLANDO FL 32809**

10. Name and Address of New Registered Agent

81 Name FUSCO DOMENIC

82 Street Address (P.O. Box Number is Not Acceptable)

1317 SOUTH PARK AVENUE

83

84 City SANFORD

FL

85 Zip Code 32771

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2.10.98

12. OFFICERS AND DIRECTORS

TITLE DPC ☐ DELETE
NAME FUSCO, DOMENIC
STREET ADDRESS 5912 JASON ST
CITY-ST-ZIP ORLANDO FL 32809

TITLE DV ☐ DELETE
NAME FUSCO, CHARLOTTE R
STREET ADDRESS 5912 JASON ST
CITY-ST-ZIP ORLANDO FL 32809

TITLE DS ☐ DELETE
NAME RENSHAW, VIVIAN
STREET ADDRESS 5912 JASON ST
CITY-ST-ZIP ORLANDO FL 32809

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE FUSCO, DOMENIC ☒ Change ☐ Addition
1.2 NAME 1317 SOUTH PARK AVE
1.3 STREET ADDRESS SANFORD FL 32771
1.4 CITY-ST-ZIP

2.1 TITLE DV ☒ Change ☐ Addition
2.2 NAME FUSCO, CHARLOTTE R.
2.3 STREET ADDRESS 1317 SOUTH PARK AVE
2.4 CITY-ST-ZIP SANFORD FL 32771

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2.10.98

CR2E037 (1/98)