

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F85367

FILED
Apr 26, 2006
Secretary of State

Entity Name: THE LIGHTING GALLERY, INC.

Current Principal Place of Business:

5149MARINER BLVD.
SPRING HILL, FL 34609

New Principal Place of Business:

5149 MARINER BLVD.
SPRING HILL, FL 34609 US

Current Mailing Address:

5149 MARINER BLVD
SPRING HILL, FL 34609 US

New Mailing Address:

FEI Number: 59-2208465 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LABORDA, MICHAEL
11458 S. PORTAGE PT.
FLORAL CITY, FL 34436 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: YOUNG, JAMES W
Address: 9834 CROFTON LANE
City-St-Zip: PORT RICHEY, FL 34668 US

Title: VP () Delete
Name: LABORDA, MICHAEL
Address: 11458 S. PORTAGE PT.
City-St-Zip: FLORAL CITY, FL 34436 US

Title: S () Delete
Name: LABORDA, PATRICIA
Address: 810 WINDMERE BLVD
City-St-Zip: INVERNESS, FL 34453 US

Title: T () Delete
Name: LABORDA, PETE
Address: 810 WINDMERE BLVD
City-St-Zip: INVERNESS, FL 34453 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL LABORDA

VP

04/26/2006

Electronic Signature of Signing Officer or Director

Date