## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98620

Jul 11, 2007 Secretary of State

Entity Name: LAMPLIGHTER FURNITURE COMPANY, INC.

Current Principal Place of Business: New Principal Place of Business:

38515 FIFTH AVENUE ZEPHYRHILLS, FL 33542

Current Mailing Address: New Mailing Address:

38515 FIFTH AVENUE ZEPHYRHILLS, FL 33542

FEI Number: 59-2170376 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KOPPELBERGER, CAROLYN
5709 13TH ST
7EPHYDHILLS EL 33540 LIS
7EPHYDHILLS EL 33540 LIS

ZEPHYRHILLS, FL 33540 US ZEPHYRHILLS, FL 33542 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: 07/11/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:** 

6041 16TH ST

ZEPHYRHILLS, FL 33542

Name: Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: KOPPELBERGER, CAROLYN Name: KOPPELBERGER, CAROLYN

Address: 5709 13TH ST Address: 5709 13TH ST

City-St-Zip: ZAPHYRHILLS, FL 33542 City-St-Zip: ZEPHYRHILLS, FL 33542

Name: KOPPELBERGER, MYRON Name: KOPPELBERGER, MYRON

 Address:
 5709 13TH ST
 Address:
 5709 13TH ST

 City-St-Zip:
 ZAPHYRHILLS, FL 33542
 City-St-Zip:
 ZEPHYRHILLS, FL 33542

Title: S () Delete Title: S (X) Change () Addition

Name: VANDEMHEEN, JULIA Name: VANDEMHEEN, JULIA

Address: 5249 11TH ST Address: 5249 11TH ST

City-St-Zip: ZAPHYRHILLS, FL 33542 City-St-Zip: ZEPHYRHILLS, FL 33542

Title: TD () Delete Title: () Change () Addition
Name: BURGETT, VELVA Name:

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CARLOYN KOPPELBERGER PD 07/11/2007