

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# G05696

**FILED**  
**May 20, 2008**  
**Secretary of State****Entity Name:** BRIDGES LIGHTNING ROD COMPANY**Current Principal Place of Business:**2809 OLD POLK CITY RD.  
LAKELAND, FL 33809 US**New Principal Place of Business:****Current Mailing Address:**2809 OLD POLK CITY RD.  
LAKELAND, FL 33809 US**New Mailing Address:****FEI Number:** 59-2248723**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BRIDGES, H. STEVEN  
2809 OLD POLK CITY RD  
LAKELAND, FL 33809 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

**OFFICERS AND DIRECTORS:****Title:** PSD ( ) Delete  
**Name:** BRIDGES, H. STEVEN,  
**Address:** 2809 OLD POLK CITY RD  
**City-St-Zip:** LAKELAND, FL**Title:** D (X) Delete  
**Name:** DARBY, STEVEN RAY,  
**Address:** 2809 OLD POLOK CITY RD  
**City-St-Zip:** LAKELAND, FL 33809**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****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 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: HARVEY STEVEN BRIDGES

PSD

05/20/2008

Electronic Signature of Signing Officer or Director

Date