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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jan 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # |

Principal Place of Business

780 DELTONA BLVD #201

H24091

(1)

Mailing Address
780 DELTONA RD #201

SOUTHERN STATES LIGHTING, INC.

DELIJONA FL 32725-7128 3. Date Incorporated or Qualified 3a. Date of Last Report <u>10/04/1984</u> 02/13/1996 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 215 CADDIE P.O. Box 68
Suite, Apt #, etc. 59-2448531 Not Applicable 26 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 Trust Fund Contribution Country 8. This corporation has liability for intangible tax under s. 199.032. Yes No Florida Statutes 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MCDERMITT, WILFORD F. 780 DELTONA BLVD #201 Street Address (P.O. Box Number is Not Acceptable) **B2 DELTONA FL 32725** 63 Zip Code City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. W.F. Mk.DERMITT set types or printed name of regentercy agent and offer it applicable SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)13. 12. Change Addition DELETE 1.1 TITLE TITLE 1.2 NAME NAME MCDERMITT, WILFORD F. 1.3 STREET ADDRESS 215 CADDIE CT STREET ADDRESS DEBARY FL 1.4 CITY-ST-ZIP CITY - ST- ZIF **DELETE** Change Addition 21 DUE TITLE PATRICK, DENNIS M. 2.2 NAME NAME 84 GODDARD DRIVE 2.3 STREET ADDRESS STREET ADDRESS DEBARY FL 2. 4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change ■ Addition 31 TITLE 1:11E 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIF 3 4. CITY-ST-ZIP DELETE Change Addition 4 1 TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - S1 - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 51 TITLE 5.2 NAME NAME 5.3 STREET ADORESS STREET ADDRESS 5.4 CITY - ST- ZIP CITY-ST-ZiP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY+ST-7/P 14. I do 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 off-cer 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 in Block 12 or Block 13 if changed, or on any attachment with an address.

V. J. M. DERMITH - W.F. Mc DER MITH - Prosip - 1/8/97