

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 30, 2001 8:00 am**  
**Secretary of State**

05-30-2001 90026 024 \*\*\*150.00

**DOCUMENT # H48455**

1. Entity Name

**LIGHTING UNLIMITED OF PANAMA CITY, INC.**

Principal Place of Business

Mailing Address

914 W. 26TH ST.  
 LYNN HAVEN FL 32444

914 W. 26TH ST.  
 LYNN HAVEN FL 32444

11977

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2514567**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HILBURN, FRANCES LAVONNE**  
**825 RADCLIFF AVE**  
**LYNN HAVEN FL 32444**

Name

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

City

**FL**

Zip Code

8. 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

*[Signature]*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	HILBURN, FRANCES LAVONNE	
STREET ADDRESS	825 RADCLIFF AVE	
CITY-ST-ZIP	LYNN HAVEN FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	HILBURN, D.E.	
STREET ADDRESS	825 RADCLIFF AVE	
CITY-ST-ZIP	LYNN HAVEN FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	EDWARDS, MIKE	
STREET ADDRESS	215 ALABAMA AVENUE	
CITY-ST-ZIP	LYNN HAVEN FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	WEBER, CHARLES C.	
STREET ADDRESS	825 RADCLIFF AVENUE	
CITY-ST-ZIP	LYNN HAVEN FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hilburn, Frances	
STREET ADDRESS	925 Radcliffe Ave.	
CITY-ST-ZIP	Lynn Haven, FL 32444	
TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Edwards, Mike	
STREET ADDRESS	215 Alabama Ave.	
CITY-ST-ZIP	Lynn Haven, FL 32444	
TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Don Hilburn	
STREET ADDRESS	925 Radcliffe Ave.	
CITY-ST-ZIP	Lynn Haven, FL 32444	
TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Edwards, Karen	
STREET ADDRESS	215 ALABAMA AVE.	
CITY-ST-ZIP	Lynn Haven, FL 32444	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *[Signature]*

**Lavonne Hilburn President**

**04-27-01**

**(850)265-3741**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)