FILED
Jun 20, 2001 8:00 am
Secretary of State
06-20-2001 90015 038 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J27378

1. Entity Name
THE OUTDOOR LAMP COMPANY, INC.

(LA)

Principal Place of Business	Mailing Address
6307 RIDGE RD. NEW PORT RICHEY FL 34668	6307 RIDGE RD. NEW PORT RICHEY FL 34668

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
6741 Industrial Ave.	6741 Industrial Ave.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Port Richey, FL	City & State: Port Richey, FL
Zip: 34668 / Country: Pasco	Zip: 34668 / Country: Pasco

4. FEI Number 59-2718835 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BALISH, FRANK
12429 DENTON AVE
HUDSON FL 34667

7. Name and Address of New Registered Agent

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 ______________________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVT BALISH, FRANK 12429 DENTON AVE HUDSON FL 34668	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/00)

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] 4-12-01 727 848-1134

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment Doc # J27318

Check # 17513 C0071863

replaces

Check # 17384

sent 5/8/01

THE OUTDOOR LAMP CO. INC.

17384

REFERENCE NO.	DESCRIPTION	INVOICE DATE	INVOICE AMOUNT	DISCOUNT TAKEN	AMOUNT PAID
	UNIFORM BUSINESS REPORT				150.00

CHECK DATE	CHECK NO.	PAYEE	DISCOUNTS TAKEN	CHECK AMOUNT
5/8/01	17384	FLORIDA DEPARTMENT OF STATE		$150.0

51N325 (1/01) 154543