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Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J31097

(5)

1. Corporation Name

STEVENSON LIGHTING, INC.

Principal Place of Business

ROUTE 2
BOX 1850 WH 450
WILLISTON FL 32696-9305

Mailing Address

ROUTE 2
BOX 1850 WH 450
WILLISTON FL 32696-9337

2. Principal Place of Business

21 2351 N.E. 126 Court

Suite, Apt. #, etc.

22 City & State

23 Williston, Florida

24 32696 25 Levy

2a. Mailing Address

26 2351 N.E. 126 Court

Suite, Apt. #, etc.

27 City & State

28 Williston, Florida

29 32696 30 Levy

3. Date Incorporated or Qualified

09/01/1986

3a. Date of Last Report

04/29/1996

4. FEI Number

59-2698851

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

STEVENSON, MICHAEL WARD
ROUTE 2 BOX 1850
WH 450
WILLISTON FL 32696

10. Name and Address of New Registered Agent

81 Name

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

2351 N.E. 126 Court

84 City

FL

85 Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME STEVENSON, MICHAEL WARD
STREET ADDRESS ROUTE 2 BOX 1850 WH 450
CITY-ST-ZIP WILLISTON FL

TITLE VP ☐ DELETE

NAME BELLAMY, ALAN
STREET ADDRESS 10831 SW 55TH COURT
CITY-ST-ZIP BELLEVUE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

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CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

2351 N.E. 126 Court

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

10831 S.E. 55 Court

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Michael Stevenson 4/22/97 352-486-4356

CR2E034 (9/96)