

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L14012

FILED
Apr 22, 2008
Secretary of State

Entity Name: STAGE AUDIO & LIGHTING PRODUCTIONS INC.

Current Principal Place of Business:

1355 BENNETT DRIVE # 129
LONGWOOD, FL 32750

New Principal Place of Business:

1339 BENNETT DRIVE # 155
LONGWOOD, FL 32750

Current Mailing Address:

1355 BENNETT DRIVE # 129
LONGWOOD, FL 32750

New Mailing Address:

1339 BENNETT DRIVE # 155
LONGWOOD, FL 32750

FEI Number: 59-3012175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOVACEVICH, PHILLIP
1846 LONG POND DRIVE
LONGWOOD, FL 32779 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KOVACEVICH, PHILLIP,
Address: 1846 LONG POND DR.
City-St-Zip: LONGWOOD, FL

Title: VP () Delete
Name: KOVACEVICH, SANDRA,
Address: 1846 LONG POND DR.
City-St-Zip: LONGWOOD, FL

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: SANDRA KOVACEVICH

VP

04/22/2008

Electronic Signature of Signing Officer or Director

Date