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Mar 21 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 # **L37898** (8)

1. Corporation Name
BRIGHT LITE COMPANY OF LEE COUNTY

Principal Place of Business
**15790-1 CHIEF COURT
FT MYERS FL 33912**

Mailing Address
**15790-1 CHIEF COURT
FT MYERS FL 33912-2261
US**



3. Date Incorporated or Qualified 12/20/1989	3a. Date of Last Report 04/29/1996
4. FEI Number 65-0164976	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent HARTLEY, FRED J 14641 FAIRHAVENS RD FT MYERS FL 33912	10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City 85. Zip Code FL
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	
NAME	HARTLEY, FRED J	12 NAME	
STREET ADDRESS	14641 FAIRHAVENS RD	13 STREET ADDRESS	
CITY, ST, ZIP	FT MYERS FL	14 CITY, ST, ZIP	
TITLE	VSD	21 TITLE	
NAME	HARTLEY, VIRGINIA ANN	22 NAME	
STREET ADDRESS	14641 FAIRHAVENS RD	23 STREET ADDRESS	
CITY, ST, ZIP	FT MYERS FL	24 CITY, ST, ZIP	
TITLE	VTD	31 TITLE	
NAME	HARTLEY, V ANN	32 NAME	
STREET ADDRESS	3866 ASCOT LANE	33 STREET ADDRESS	
CITY, ST, ZIP	FT MYERS FL	34 CITY, ST, ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY, ST, ZIP		44 CITY, ST, ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY, ST, ZIP		54 CITY, ST, ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY, ST, ZIP		64 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:

[Signature] V. Ann Hartley 3/14/97 941-481-1010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)