

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M68137

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: CITY LIGHTING SERVICE, INC.

## Current Principal Place of Business:

5654 N.W. 24TH ST.  
OKEECHOBEE, FL 34972 US

## New Principal Place of Business:

## Current Mailing Address:

5654 N.W. 24TH ST.  
OKEECHOBEE, FL 34972 US

## New Mailing Address:

FEI Number: 65-0100028

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MILLER, ALAN  
5654 N.W. 34TH ST.  
OKEECHOBEE, FL 34972 US

## Name and Address of New Registered Agent:

MILLER, ALAN P  
5654 N.W. 34TH ST.  
OKEECHOBEE, FL 34972 US

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: ALAN MILLER

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MILLER, ALAN  
Address: 5654 N.W. 24TH ST.  
City-St-Zip: OKEECHOBEE, FL 34972

Title: M ( ) Delete  
Name: MILLER, GLEN  
Address: 10341 MARLIN DR.  
City-St-Zip: BOCA RATON, FL 33428

Title: VT ( ) Delete  
Name: MILLER, BETTY  
Address: 5654 N.W. 24TH ST.  
City-St-Zip: OKEECHOBEE, FL 34972

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: MILLER, GLEN  
Address: 10341 MARLIN DR.  
City-St-Zip: BOCA RATON, FL 33428

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: BATES, GARY  
Address: 10800 N. BRANCH RD.  
City-St-Zip: BOCA RATON, FL 33428 US

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: ALAN MILLER

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date