

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90105 032 ***150.00

DOCUMENT # M70513

1. Corporation Name
C & L LIGHTING, INC.

Principal Place of Business
13050 91ST STREET NORTH
#A
LARGO FL 33773
US

Mailing Address
P.O. BOX 8896
MADEIRA BEACH FL 33738
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/03/1988

4. FEI Number
59-2876372

Applied For
Not Applicable

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

6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

HUEBNER, WILLIAM
15908 GULF BLVD.
REDINGTON BEACH FL 33708

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 X 18400 GULF BLVD. APT. # 1302
84 City X INDIAN SHORES FL 85 Zip Code X 33785

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 P
NAME HUEBNER, WILLIAM
STREET ADDRESS 15908 GULF BLVD.
CITY-ST-ZIP REDINGTON BCH. FL

TITLE VS
NAME HOLTON, CAROL
STREET ADDRESS 15908 GULF BLVD.
CITY-ST-ZIP REDINGTON BCH. FL

TITLE T
NAME JAKEWAY, LYNN
STREET ADDRESS 15908 GULF BLVD.
CITY-ST-ZIP REDINGTON BCH. FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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 X 18400 GULF BLVD. APT # 1302
1.4 CITY-ST-ZIP X INDIAN SHORES, FL. 33785

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME HEWETSON, CAROL
2.3 STREET ADDRESS X 18400 GULF BLVD APT. # 1309
2.4 CITY-ST-ZIP X INDIAN SHORES, FL. 33785

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS X 6251 SHORELINE DRIVE
3.4 CITY-ST-ZIP X ST PETERSBURG, FL. 33708

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: William A. Huebner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-10-99 727-884-5554
Date Daytime Phone #

CR2E034 (11/98)