

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003345

FILED
Jan 28, 2005
Secretary of State

Entity Name: LIGHT INTERNATIONAL, INC.

Current Principal Place of Business:

49 SANDRA DRIVE
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

49 SANDRA DRIVE
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 59-3689162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARSON, LARRY E
49 SANDRA DR.
JACKSONVILLE BEACH, FL 32250 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: POLY, PAVEL MR.
Address: 621 W. SURF SPRAY LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: D () Delete
Name: CARSON, LARRY T MR.
Address: 714 HWY. 221 S.
City-St-Zip: GREENWOOD, SC 29646 US

Title: P/D () Delete
Name: CARSON, LARRY E REV.
Address: 49 SANDRA DR.
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: D/ST () Delete
Name: ALAN, CHERNOMASHENTS MR.
Address: 12851 CHET'S CR. DR. N.
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: D () Delete
Name: MARTIN, DAVID K MR.
Address: 139 ISLAND DR.
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: CARSON, LARRY T MR.
Address: 533 NE 87TH AVE. MSC#862
City-St-Zip: PORTLAND, OR 97220 US

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

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 for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY E. CARSON

P/D

01/28/2005

Electronic Signature of Signing Officer or Director

Date