

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002065

FILED
Apr 30, 2008
Secretary of State

Entity Name: LIMELIGHT PRODUCTIONS OF NAPLES INC.

Current Principal Place of Business:

58 BAY POINTE DRIVE EXT
BUZZARDS BAY, MA 34103 US

New Principal Place of Business:

58 BAY POINTE DRIVE EXT
BUZZARDS BAY, MA 02532 US

Current Mailing Address:

P. O. BOX 616
BUZZARDS BAY, MA 02532 US

New Mailing Address:

FEI Number: 20-2325344 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIMI JAN, JAN D
2697 POINCIANA DRIVE
NAPLES, FL 34105 US

Name and Address of New Registered Agent:

LILI, MONTES D
2697 POINCIANA DRIVE
NAPLES, FL 34105 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: LILI MONTES

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KIMI JAN, JAN D
Address: 2697 POINCIANA DR
City-St-Zip: NAPLES, FL 34105

Title: D () Delete
Name: DOOLEY, WILLIAM D
Address: 538 9TH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: HOUTON, JOHN F D
Address: 58 BAY POINTE DRIVE EXT
City-St-Zip: BUZZARDS BAY, MA 02532

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MONTES, LILI D
Address: 2697 POINCIANA DR
City-St-Zip: NAPLES, FL 34105

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

Title: PD (X) Change () Addition
Name: HOUTON, JOHN F PD
Address: 58 BAY POINTE DRIVE EXT
City-St-Zip: BUZZARDS BAY, MA 02532

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN F. HOUTON

P D

04/30/2008

Electronic Signature of Signing Officer or Director

Date