

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000171

FILED
Mar 19, 2009
Secretary of State

Entity Name: LIGHT & FIRE, INC.

Current Principal Place of Business:

1014 THOMAS ROAD
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

PO BOX 92956
LAKELAND, FL 338042956

New Mailing Address:

1014 THOMAS ROAD
LAKELAND, FL 33809

FEI Number: 43-2116804

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEENEN, MARY
1014 THOMAS ROAD
LAKELAND, FL 33809 US

Name and Address of New Registered Agent:

KEENEN, MARY J
1014 THOMAS ROAD
LAKELAND, FL 33809 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: MARY J KEENEN

03/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KEENEN, MARY
Address: PO BOX 92956
City-St-Zip: LAKELAND, FL 338042956

Title: DV () Delete
Name: NAIL, EVA P
Address: PO BOX 92956
City-St-Zip: LAKELAND, FL 338042956

Title: DS () Delete
Name: CLARK, GLEN
Address: 127 N.E. 1ST STREET
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D () Delete
Name: HELMS, BRIAN
Address: PO BOX 92956
City-St-Zip: LAKELAND, FL 338042956

Title: D () Delete
Name: PATTERSON, RON
Address: 200 AVENUE K, SUITE E
City-St-Zip: SATELLITE BEACH, FL 32937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KEENEN, MARY J
Address: PO BOX 92956
City-St-Zip: LAKELAND, FL 338042956

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

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

Title: D (X) Change () Addition
Name: HELMS, BRIAN
Address: 200 SECOND STREE
City-St-Zip: ST. MARY, MO 63673

Title: D (X) Change () Addition
Name: PATTERSON, RON
Address: 200 AVENUE K, SUITE E
City-St-Zip: WINTER HAVEN, FL 33880

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: MARY J. KEENEN

DP

03/19/2009

Electronic Signature of Signing Officer or Director

Date