

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 05, 2009
Secretary of State**

DOCUMENT# N07000003927

Entity Name: THE CENTER OF L.I.G.H.T., INC.

Current Principal Place of Business:

1860 RESTFUL DRIVE
BRADENTON, FL 34207

New Principal Place of Business:

Current Mailing Address:

1860 RESTFUL DRIVE
BRADENTON, FL 34207

New Mailing Address:

FEI Number: 54-2044136 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MAPLES, SUSAN
1860 RESTFUL DRIVE
BRADENTON, FL 34207 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: P () Delete
Name: MAPLES, SUSAN J
Address: 1860 RESTFUL DRIVE
City-St-Zip: BRADENTON, FL 34207

Title: D () Delete
Name: MCGLAUN, WILLIAM
Address: P.O. BOX 248
City-St-Zip: LIVELY, VA 22507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: SUSAN JOY MAPLES

Electronic Signature of Signing Officer or Director

PRES

05/05/2009

Date