FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N17047 (4)

1. Corporation Name

LIGHT UP ORLANDO, INC.

Principal Place of Business	Mailing Address
25 S. MAGNOLIA AVENUE ORLANDO FL 32801 US	25 S. MAGNOLIA AVENUE ORLANDO FL 32801 US

3. Date Incorporated or Qualified: **09/30/1986**
3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: **59-2815584** ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

PAULAUSKI, ELIZABETH
25 S. MAGNOLIA AVENUE
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Elizabeth Paulauski Executive Director 4/15/96
Signature, type or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when not stating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T FLUKE, BILL 200 S. ORANGE AVE., 20TH FLOOR ORLANDO FL	☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	Treasurer Barwick, Tracy 390 N. Orange Ave # 1700 ORLANDO FL 32801	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LUSSIER, JIM 225 E ROBINSON ST. SUITE 600 ORLANDO FL	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	V.P. Lussier, Jim 225 E Robinson St. Suite 600 Orlando, FL 32801	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C BELLOMO, FRANK 111 N. ORNAGE AVE ORLANDO FL	☒ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KELLY, SARAH 200 S. ORANGE AVE ORLANDO FL	☒ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STERLING, KIMBERLY 1516 E. HILCREST ORLANDO FL	☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	President Suite 212	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	700001864241 -06/17/96--01067--025 ***61.25	☐ Change ☐ Addition 5/1 12

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the inform
oath; that I am an o
appears in Block 12

SIGNATURE: Kimberly Sterling Kimberly Sterling 5/9/96 407-648-4010