

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 20, 2006  
Secretary of State**

DOCUMENT# N24019

Entity Name: LAMPLIGHTERS, INC.

**Current Principal Place of Business:**

205 WEST BUSCH BLVD., SUITE 200  
TAMPA, FL 33612

**New Principal Place of Business:**

**Current Mailing Address:**

205 WEST BUSCH BLVD., SUITE 200  
TAMPA, FL 33612

**New Mailing Address:**

FEI Number: 59-2870886      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CLARKE, ROBERT  
205 WEST BUSCH BOULEVARD  
SUITE 200  
TAMPA, FL 33612 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: PD ( ) Delete  
Name: LIENHART, SUSY  
Address: 1022 S. FRANKLIN RD.  
City-St-Zip: TAMPA, FL 33629

Title: SD ( ) Delete  
Name: PFEIFFER, SUMMER  
Address: 3707 W. LEONA ST.  
City-St-Zip: TAMPA, FL 33629

Title: TD ( ) Delete  
Name: CONASTY, CYNTHIA  
Address: 2401 ARDSDEN PLACE #603B  
City-St-Zip: TAMPA, FL 33629

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: LIENHART, SUSY

PD

02/20/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date