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Feb 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # **N31678** **(8)**

1. Corporation Name
EDISON FESTIVAL OF LIGHT, INC.

Principal Place of Business	Mailing Address
% THOMAS B. HART PO BOX 1056 2210 BAY ST FORT MYERS FL 33901	% THOMAS B. HART PO BOX 1056 2210 BAY ST FORT MYERS FL 33901

3. Date Incorporated or Qualified: 04/12/1989

4. FEI Number: 65-0118122 ☐ Applied For ☐ Not Applicable

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

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

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

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

HART, THOMAS B.
1625 HENDRY ST
S301
FORT MYERS FL 33901

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE	P	☑ Change ☐ Addition
NAME	HIMSCHOOT, ROBERT		1.2 NAME	Martin, Ross	
STREET ADDRESS	2210 BAY STREET		1.3 STREET ADDRESS	12610 New Brittany Blvd	
CITY-ST-ZIP	FT MYERS FL 33901		1.4 CITY-ST-ZIP	Ft. Myers, Fl. 33907	
TITLE	VP	☐ DELETE	2.1 TITLE	VP	☑ Change ☐ Addition
NAME	MARTIN, ROSS		2.2 NAME	Valenti, William	
STREET ADDRESS	12610 NEW BRITTANY BLVD.		2.3 STREET ADDRESS	2210 Bay St	
CITY-ST-ZIP	FORT MYERS FL 33907		2.4 CITY-ST-ZIP	Ft. Myers, Fl. 33901	
TITLE	P/D	☐ DELETE	3.1 TITLE	SD/VP	☐ Change ☑ Addition
NAME	KAYE, BOB		3.2 NAME	Bob Grissinger	
STREET ADDRESS	2133 BROADWAY		3.3 STREET ADDRESS	2624 Palm Beach Blvd	
CITY-ST-ZIP	FORT MYERS FL		3.4 CITY-ST-ZIP	Ft. Myers, Fl. 33916	
TITLE	SD	☐ DELETE	4.1 TITLE	T	☑ Change ☐ Addition
NAME	VALENTI, WILLIAM		4.2 NAME	Metheny, Marvin	
STREET ADDRESS	2210 BAY STREET		4.3 STREET ADDRESS	2138 McGregor Blvd.	
CITY-ST-ZIP	FT MYERS FL 33901		4.4 CITY-ST-ZIP	Ft. Myers, Fl. 33901	
TITLE	T	☐ DELETE	5.1 TITLE	Sec	☐ Change ☑ Addition
NAME	METHENY, MARVIN		5.2 NAME	Griffen, Gary	
STREET ADDRESS	1636 HENDRY ST		5.3 STREET ADDRESS	2701 Prince St.	
CITY-ST-ZIP	FT. MYERS FL		5.4 CITY-ST-ZIP	Ft. Myers, Fl. 33916	
TITLE	D	☐ DELETE	6.1 TITLE	Past P	☑ Change ☐ Addition
NAME	BENNETT, SUSAN		6.2 NAME	Himschoot, Robert	
STREET ADDRESS	12734 KENWOOD LANE, STE. 85		6.3 STREET ADDRESS	2210 Bay St.	
CITY-ST-ZIP	FT. MYERS FL 33907		6.4 CITY-ST-ZIP	Ft. Myers, Fl. 33901	

CR2E037 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Pres 1-16-98 941-939-4455