

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90148 046 ****61.25

DOCUMENT # N31678 1. Entity Name EDISON FESTIVAL OF LIGHT, INC.					
Principal Place of Business 1300 HENDRY STREET FORT MYERS, FL 33901			Mailing Address 1300 HENDRY STREET FORT MYERS, FL 33901		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0118122	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent PHILLIPS, LOUISE 1300 HENDRY STREET FORT MYERS, FL 33901				7. Name and Address of New Registered Agent Name Steve Stage Street Address (P.O. Box Number is Not Acceptable) 1561 Passaic Ave City Fort Myers, FL Zip Code 33901	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and fee if applicable.			DATE 4/22/2008 (NOTE: Registered Agent signature required when reappointing)		
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MANN, JR., FRANK 24 GEORGETOWN FORT MYERS, FL 33919	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Past President Steve Stage 1561 Passaic Ave Fort Myers, FL 33901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STAGE, STEVE 1561 PASSAIC AVENUE FORT MYERS, FL 33901	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres. John Clinger 13250 University Center Blvd. Fort Myers, FL 33901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CLINGER, JOHN 13250 UNIVERSITY CENTER BLVD. FORT MYERS, FL 33901	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	1-V.P. Laura Hamel Jones 3860 Colonial Blvd. - #200 Fort Myers, FL 33901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PHILLIPS, LOUISE 14201 JETPORT LOOP FORT MYERS, FL 33913	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	2-V.P. William Mankin 14870 Bonaire Circle Fort Myers, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HAMEL-JONES, LAURA 3860 COLONIAL BLVD. - SUITE 200 FORT MYERS, FL 33912	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Tres. Emory Bottorff 3731 Arlington Street Fort Myers, FL 33901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC. KAREN RYAN 1049 EL RIO AVE. FORT MYERS, FL 33919	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec. KAREN RYAN 1049 EL RIO AVE. FORT MYERS, FL 33919
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR			DATE 4/22/2008 Daytime Phone #		