## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000110484

Address:

City-St-Zip:

140 MARITIME DRIVE

SANFORD, FL 32771 63

Entity Name: INDUSTRIAL LIGHTING PRODUCTS, INC.

FILED Feb 01, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 140 MARITIME DRIVE SANFORD, FL 32771 **Current Mailing Address: New Mailing Address:** 140 MARITIME DRIVE SANFORD, FL 32771 FEI Number: 59-3699340 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITH, LANCE D 2781 W STATE RD 434 LONGWOOD, FL 327794880 US 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition PLOURDE, VON A Name: Name: 148 MARITIME DRIVE Address: Address: City-St-Zip: SANFORD, FL 32771 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: PLOURDE, JASON V Name: 148 MARITIME DRIVE Address: Address: SANFORD, FL 32771 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition BRENNAN, MICHAEL Name: Name: 148 MARITIME DRIVE Address: Address: City-St-Zip: SANFORD, FL 32771 City-St-Zip: Title: VΡ ( ) Delete Title: () Change () Addition HENDREN, JASON MR Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: JASON HENDREN VP 02/01/2005