

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000110484

FILED  
Sep 21, 2007  
Secretary of State

Entity Name: INDUSTRIAL LIGHTING PRODUCTS, INC.

## Current Principal Place of Business:

250 NATIONAL PLACE  
SUITE 122  
LONGWOOD, FL 32750

## New Principal Place of Business:

3995 ST. JOHNS PARKWAY  
SANFORD, FL 32771

## Current Mailing Address:

140 MARITIME DRIVE  
SANFORD, FL 32771

## New Mailing Address:

3995 ST. JOHNS PARKWAY  
SANFORD, FL 32771

FEI Number: 59-3699340

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SMITH, LANCE D  
2781 W STATE RD 434  
LONGWOOD, FL 327794880 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: LANCE D SMITH

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PLOURDE, VON A  
Address: 148 MARITIME DRIVE  
City-St-Zip: SANFORD, FL 32771

Title: VP ( ) Delete  
Name: PLOURDE, JASON V  
Address: 148 MARITIME DRIVE  
City-St-Zip: SANFORD, FL 32771

Title: VP ( ) Delete  
Name: BRENNAN, MICHAEL  
Address: 148 MARITIME DRIVE  
City-St-Zip: SANFORD, FL 32771

Title: VP ( ) Delete  
Name: HENDREN, JASON MR  
Address: 250 NATIONAL PLACE #122  
City-St-Zip: LONGWOOD, FL 32750 63

## 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:

Title: VP (X) Change ( ) Addition  
Name: HENDREN, JASON MR  
Address: 3995 ST. JOHNS PARKWAY  
City-St-Zip: SANFORD, FL 32771

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JASON HENDREN

VP

09/21/2007

Electronic Signature of Signing Officer or Director

Date