FILED
Jun 05, 2003 8:00 am
Secretary of State
06-05-2003 90129 014 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000111870

1. Entity Name
CONTINENTAL LIGHTING SERVICES, INC.

Principal Place of Business	Mailing Address
101 N. WOODLAND BLVD #216 DELAND, FL 32720	PO BOX 29467 DALLAS, TX 75229

2. Principal Place of Business	3. Mailing Address
5077 Eaglemere Dr	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Orlando FL	City & State
Zip: 32819 Country	Zip Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: 59-3686041 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CRAMER, CHARLES W 1420 EDGEWATER DRIVE ORLANDO, FL 32804	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 title if applicable. (NOTE: Registered Agent's signature required when reinstating) DATE

FILE NOW!! $$ 150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CARL, DAVID H 11566 CROMWELL CIRCLE DALLAS, TX 75229	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P, D CARL, David H 11566 Cromwell Circle Dallas, TX 75229	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS HUFFMAN, DENENE 945 FATIO ROAD DELAND, FL 32720	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD EARL, DAVID H 11566 CROMWELL CIRCLE DALLAS, TX 75229	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 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 607, 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: David H Carl David H Carl 6/2/03 9723653608
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #