

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000098540

**FILED**  
**Apr 23, 2011**  
**Secretary of State**

**Entity Name:** LIGHTWAVE DIGITAL PRODUCTIONS, INC.

**Current Principal Place of Business:**

2940 LONG LAKE DR  
STE #201  
TITUSVILLE, FL 32780

**New Principal Place of Business:**

**Current Mailing Address:**

2940 LONG LAKE DR  
STE #201  
TITUSVILLE, FL 32780

**New Mailing Address:**

**FEI Number:** 72-1337306

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SWEARENGIN, WILLIAM D  
2940 LONG LAKE DR  
STE #201  
TITUSVILLE, FL 32780 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** SWEARENGIN, WILLIAM D  
**Address:** 2940 LONG LAKE DR STE #201  
**City-St-Zip:** TITUSVILLE, FL 32780

**Title:** VP  
**Name:** SWEARENGIN, EILEEN M  
**Address:** 2940 LONG LAKE DR STE #201  
**City-St-Zip:** TITUSVILLE, FL 32780

I hereby 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 all other like empowered.

**SIGNATURE:** WILLIAM D. SWEARENGIN

RRES

04/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date