2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2004 8:00 am
Secretary of State
02-06-2004 90027 028 ***150.00

DOCUMENT # P03000061791

1. Entity Name
LIGHTING SOLUTIONS, INC.

Principal Place of Business	Mailing Address
3624 DEL PRADO BLVD. UNIT D CAPE CORAL FL 33904	3624 DEL PRADO BLVD. UNIT D CAPE CORAL FL 33904

2. Principal Place of Business	3. Mailing Address
11780 B METRO PKY	11780 B METRO PKY
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: FT. Myers FL	City & State: FT Myers FL
Zip: 33912 Country: LEE	Zip: 33912 Country: Lee

MOORE CR2E034 (11/03)

4. FEI Number: 13-4253068 — 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
STAMBOULY, CARL 3624 DEL PRADO BLVD. UNIT D CAPE CORAL FL 33904	Name: LYNNE STAMBOULY Street Address (P.O. Box Number is Not Acceptable): 11780 B METRO PKY City: FT Myers FL Zip Code: 33912

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: Lynne Stamboely 2-2-4
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 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	D ☒ Delete	TITLE	PRES ☒ Change ☐ Addition
NAME	STAMBOULY, CARL	NAME	LYNNE STAMBOULY PRESIDENT,
STREET ADDRESS	3624 DEL PRADO BLVD., UNIT D	STREET ADDRESS	11780 B METRO PKY
CITY-ST-ZIP	CAPE CORAL FL 33904	CITY-ST-ZIP	FT. MYERS FL 33912 DIRECTOR
TITLE	☐ Delete	TITLE	V PRES. - SEC - [redacted]. ☒ Change ☐ Addition
NAME		NAME	CARL STAMBOULY V. PRESIDENT,
STREET ADDRESS		STREET ADDRESS	11780 B METRO PKY SECRETARY,
CITY-ST-ZIP		CITY-ST-ZIP	FT MYERS FL 33912 DIRECTOR
TITLE	☐ Delete	TITLE	DOUGLAS ROTH, JR ☒ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	11780 B METRO PKY TREASURER
CITY-ST-ZIP		CITY-ST-ZIP	FT. Myers, FL 33912
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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: Carl G. Stamboulu 2/2/04 239 671 4600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #