

2004 FOR PROFIT CORPORATION ANNUAL REPORT (A/R)

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 3624 DEL PRADO BLVD. UNIT D CAPE CORAL FL 33904		Mailing Address 3624 DEL PRADO BLVD. UNIT D CAPE CORAL FL 33904	
2. Principal Place of Business 11780 B METRO PKY		3. Mailing Address 11780 B METRO PKY	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State FT. MYERS FL		City & State FT MYERS FL	
Zip 33912		Zip 33912	
Country LEE		Country Lee	
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 STAMBOULY, CARL 3624 DEL PRADO BLVD. UNIT D CAPE CORAL FL 33904		7. Name and Address of New Registered Agent Name LYNN 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 <u><i>Lyne Stambouly</i></u> DATE <u>2/2/04</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
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 NAME STAMBOULY, CARL STREET ADDRESS 3624 DEL PRADO BLVD., UNIT D CITY-ST-ZIP CAPE CORAL FL 33904	TITLE PRES ☒ Change ☐ Addition NAME LYNN STAMBOULY STREET ADDRESS 11780 B METRO PKY CITY-ST-ZIP FT. MYERS FL 33912	TITLE U.PRES. - SEC - ☒ Change ☐ Addition NAME CARL STAMBOULY STREET ADDRESS 11780 B METRO PKY CITY-ST-ZIP FT. MYERS FL 33912	
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE VPRES. - SEC - ☒ Change ☐ Addition NAME CARL STAMBOULY STREET ADDRESS 11780 B METRO PKY CITY-ST-ZIP FT. MYERS FL 33912		
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE DOUGLAS ROTH, JR ☒ Change ☐ Addition NAME 11780 B METRO PKY STREET ADDRESS FT. MYERS, FL 33912 CITY-ST-ZIP		
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP		
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP		
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS 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: <u><i>Carl G. Stambouly</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <u>2/2/04</u> Daytime Phone # <u>239 671 4600</u>	