

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000063581

FILED  
Apr 19, 2004  
Secretary of State

Entity Name: LIGHTS UP, INC.

## Current Principal Place of Business:

3400 S. TAMIAMI TRAIL  
SUITE 202  
SARASOTA, FL 34239 US

## New Principal Place of Business:

## Current Mailing Address:

3400 S. TAMIAMI TRAIL  
SUITE 202  
SARASOTA, FL 34239 US

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LUZIER, THOMAS B  
3400 S. TAMIAMI TRAIL  
SUITE 202  
SARASOTA, FL 34239 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS ( ) Change (X) Addition  
Name: NEWBERRY, ALEXANDER S  
Address: 3624 BENEVA OAKS BOULEVARD  
City-St-Zip: SARASOTA, FL 34238

Title: DVPT ( ) Change (X) Addition  
Name: JOANNETTE, MONIQUE  
Address: 3624 BENEVA OAKS BOULEVARD  
City-St-Zip: SARASOTA, FL 34238

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALEXANDER S. NEWBERRY

DPS

04/19/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date