

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90997 044 ***150.00

94066507



DOCUMENT # P03000105259 1. Entity Name LIGHT UP BRANDON, INC.																	
Principal Place of Business 603 VICTORIA STREET BRANDON, FL 33510			Mailing Address 603 VICTORIA STREET BRANDON, FL 33510														
2. Principal Place of Business 119 Central DR Suite, Apt. #, etc. suite "A" City & State Brandon FL Zip 33510 Country U.S.A.		3. Mailing Address 119 Central DR Suite, Apt. #, etc. suite "A" City & State Brandon FL Zip 33510 Country U.S.A.		04202004 Chg-P CR2E034 (10/03)													
4. FEI Number 20-0247181				Applied For <input type="checkbox"/> Not Applicable													
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent BENNETT, CHRIS 603 VICTORIA STREET BRANDON, FL 33510													
7. Name and Address of New Registered Agent 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>													
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 40%;">P</td> <td style="width: 10%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>BENNETT, CHRIS</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>603 VICTORIA STREET</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>BRANDON, FL 33510</td> <td></td> </tr> </table>		TITLE	P	<input type="checkbox"/> Delete	NAME	BENNETT, CHRIS		STREET ADDRESS	603 VICTORIA STREET		CITY-ST-ZIP	BRANDON, FL 33510	
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 40%;"></td> <td style="width: 10%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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.			
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition															
NAME																	
STREET ADDRESS																	
CITY-ST-ZIP																	
SIGNATURE: <u>Chris A. Bennett</u> Chris A. Bennett, Pres <u>April 23, 04</u> <u>813-662-3100</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																	