


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000105259 1. Entity Name LIGHT UP BRANDON, INC.	
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Principal Place of Business 119 CENTRAL DR STE A BRANDON, FL 33510	Mailing Address 119 CENTRAL DR STE A BRANDON, FL 33510
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04222008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

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**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BENNETT, CHRIS 603 VICTORIA STREET BRANDON, FL 33510
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BENNETT, CYNTHIA 603 VICTORIA ST BRANDON, FL 33510
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WALKER, M SHANNON 1214 HAWKLEY CT VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALKER, SUZANNE J 1214 HAWKLEY CT VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUNNINGHAM, JOHN 628 PENN NATIONAL RD SEFFNER, FL 33584
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUNNINGHAM, PAMELA 628 PENN NATIONAL RD SEFFNER, FL 33584

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Cynthia Bennett* *Cynthia Bennett* **4-23-08** **813-662-3100**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #