2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 28, 2009
Secretary of State

DOCUMENT# P03000105259

Entity Name: LIGHT UP BRANDON, INC.

Current Principal Place of Business:

119 CENTRAL DR STE A
BRANDON, FL 33510

New Principal Place of Business:

Current Mailing Address:

119 CENTRAL DR STE A
BRANDON, FL 33510

New Mailing Address:

FEI Number: 20-0247181 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BENNETT, CHRIS
603 VICTORIA STREET
BRANDON, FL 33510 US

Name and Address of New Registered Agent:

WALKER, M SHANNON
119 CENTRAL DR STE A
BRANDON, FL 33510 US

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: M SHANNON WALKER 09/28/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BENNETT, CHRIS
Address: 603 VICTORIA STREET
City-St-Zip: BRANDON, FL 33510 US

Title: S ( ) Delete
Name: BENNETT, CYNTHIA
Address: 603 VICTORIA ST
City-St-Zip: BRANDON, FL 33510

Title: V ( ) Delete
Name: WALKER, M SHANNON
Address: 1214 HAWKLEY CT
City-St-Zip: VALRICO, FL 33594

Title: D (X) Delete
Name: WALKER, SUZANNE J
Address: 1214 HAWKLEY CT
City-St-Zip: VALRICO, FL 33594

Title: D (X) Delete
Name: CUNNINGHAM, JOHN
Address: 628 PENN NATIONAL RD
City-St-Zip: SEFFNER, FL 33584

Title: D (X) Delete
Name: CUNNINGHAM, PAMELA
Address: 628 PENN NATIONAL RD
City-St-Zip: SEFFNER, FL 33584

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P D (X) Change ( ) Addition
Name: WALKER, M SHANNON
Address: 1214 HAWLEY COURT
City-St-Zip: VALRICO, FL 33594 US

Title: S D (X) Change ( ) Addition
Name: WALKER, SUZANNE J
Address: 1214 HAWLEY COURT
City-St-Zip: VALRICO, FL 33594

Title: T (X) Change ( ) Addition
Name: WALKER, SUZANNE J
Address: 1214 HAWLEY COURT
City-St-Zip: VALRICO, FL 33594

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SUZANNE J WALKER S 09/28/2009
Electronic Signature of Signing Officer or Director Date