


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2008 08:00 AM
Secretary of State

DOCUMENT # P06000001972	
1. Entity Name NLITEN, INC.	

Principal Place of Business 129 MAGNOLIA STREET SATSUMA, FL 32189	Mailing Address 129 MAGNOLIA STREET SATSUMA, FL 32189
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DO NOT WRITE IN THIS SPACE



01212008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-4039989	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

SMITH, LINDA L
129 MAGNOLIA STREET
SATSUMA, FL 32189

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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 *Linda L Smith* (NOTE: Registered Agent signature required when reinstating) DATE 2-2-08

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	U000000821435 02/19/08-80024-019 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SMITH, LINDA L 129 MAGNOLIA STREET SATSUMA, FL 32189
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC SMITH, LINDA L 129 MAGNOLIA STREET SATSUMA, FL 32189
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA SMITH, LINDA L 129 MAGNOLIA STREET SATSUMA, FL 32189
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR SMITH, LINDA L 129 MAGNOLIA STREET SATSUMA, FL 32189
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 *Linda L Smith*