2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2007
Secretary of State

DOCUMENT# P06000089690

Entity Name: SPOTLIGHT RENTALS, INC.

Current Principal Place of Business:

1222 E. MOUNTAIN DR.
WEST PALM BEACH, FL 33406

New Principal Place of Business:

1100 PARK AVE EAST
TALLAHASSEE, FL 32301

Current Mailing Address:

1222 E. MOUNTAIN DR.
WEST PALM BEACH, FL 33406

New Mailing Address:

FEI Number: 20-5529356 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOHLSIFER & ASSOCIATES, P.A.
319 CLEMATIS STREET
SUITE 811
WEST PALM BEACH, FL 33401 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: P ( ) Delete
Name: WOHLSIFER, WILLIAM R
Address: POST OFFICE BOX 731166
City-St-Zip: ORMOND BEACH, FL 32173

Title: VP ( ) Delete
Name: WOHLSIFER, WILLIAM R
Address: POST OFFICE BOX 731166
City-St-Zip: ORMOND BEACH, FL 32173

Title: TRES (X) Delete
Name: WOHLSIFER, WILLIAM R
Address: POST OFFICE BOX 731166
City-St-Zip: ORMOND BEACH, FL 32173

Title: SECY (X) Delete
Name: WOHLSIFER, WILLIAM R
Address: POST OFFICE BOX 731166
City-St-Zip: ORMOND BEACH, FL 32173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WOHLSIFER, WILLIAM R
Address: 319 CLEMATIS STREET
City-St-Zip: WEST PALM BEACH, FL 33401

Title: DIR (X) Change ( ) Addition
Name: WOHLSIFER, WILLIAM R
Address: 319 CLEMATIS STREET
City-St-Zip: WEST PALM BEACH, FL 33401

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 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: WILLAM R. WOHLSIFER P 03/04/2007

Electronic Signature of Signing Officer or Director — Date