

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000079878

Entity Name: D & S LIGHTING, INC

FILED
Feb 23, 2009
Secretary of State

Current Principal Place of Business:

5175 WOODSTONE CIRCLE E
LAKE WORTH, FL 33463

New Principal Place of Business:

125 SW MALLARD GLN
LAKE CITY, FL 32024

Current Mailing Address:

5175 WOODSTONE CIRCLE E
LAKE WORTH, FL 33463

New Mailing Address:

125 SW MALLARD GLN
LAKE CITY, FL 32024

FEI Number: 74-3221784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONKLIN, DENNIS P
125 SW MALLARD GLN
LAKE CITY, FL 32024 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: CONKLIN, DENNIS P
Address: 5175 WOODSTONE CIRCLE E
City-St-Zip: LAKE WORTH, FL 33463

Title: VP () Delete
Name: CONKLIN, SHELBY L
Address: 5175 WOODSTONE CIRCLE E
City-St-Zip: LAKE WORTH, FL 33463

Title: S () Delete
Name: RUDDOCK, EVERTON
Address: 920 INDIANA AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CONKLIN, DENNIS P
Address: 125 SW MALLARD GLN
City-St-Zip: LAKE CITY, FL 32024

Title: VP (X) Change () Addition
Name: CONKLIN, SHELBY L
Address: 125 SW MALLARD GLN
City-St-Zip: LAKE CITY, FL 32024

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: DENNIS P CONKLIN

P

02/23/2009

Electronic Signature of Signing Officer or Director

Date