## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P09000051115

Entity Name: VP LIGHTING CONSULTANTS, INC.

FILED Feb 18, 2011 Secretary of State

| ,   |   |                                  |                                    |                                      |
|---|---|----------------------------------|------------------------------------|--------------------------------------|
| Current Principal Place of Business:  |   |                                  | New Principal Place of Business:   |                                      |
|   | ALBANS LOOP<br>OW, FL 32746             |                                  |                                    |                                      |
| Current Mailing Address:  |   |                                  | New Mailing Address:               |                                      |
|   | ALBANS LOOP<br>OW, FL 32746             |                                  |                                    |                                      |
| FEI Numbe   | er: 27-0351501                          | FEI Number Applied For ( )       | FEI Number Not Applicable ( )      | Certificate of Status Desired ( )    |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: |   |                                  |                                    |                                      |
|   | ANCE D<br>ST STATE ROA<br>DOD, FL 32779 |                                  |                                    |                                      |
|   | e named entity s<br>te of Florida.      | submits this statement for the p | ourpose of changing its registered | office or registered agent, or both, |
| SIGNATL   | JRE:                                    |                                  |                                    |                                      |
|   | Electron                                | ic Signature of Registered Age   | ent                                | Date                                 |
|   |   |                                  |                                    |                                      |
| OFFICER   | RS AND DIREC                            | TORS:                            |                                    |                                      |
| Title:<br>Name:   | P<br>PLOURDE, VON                       |                                  |                                    |                                      |

Name: PLOURDE, VON
Address: 1183 ST. ALBANS LOOP
City-St-Zip: HEATHROW, FL 32746

Title: VP

Name: PLOURDE, RACHEL
Address: 1183 ST. ALBANS LOOP
City-St-Zip: HEATHROW, FL 32746

I hereby 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 all other like empowered.

SIGNATURE: VON PLOURDE PRES 02/18/2011