FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000054910

1. Corporation Name

DENNISON LIGHTING, INC.

Principal Place of Business
15 STILLWRIGHT WAY

May 01, 1999 8:00 am Secretary of State 05-01-1999 90015 038 ***150.00



	,							
Principal Place of Business Mailing Address){	(libit east seet
15 STILLWRIGHT WAY KEY LARGO FL 33037		15 STILLWRIGHT WAY KEY LARGO FL 33037				DO NOT WRITE IN THE	S SPACE	
						3. Date Incorporated or Qualifed 08/02/1993		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Ap	plied For
21		26				65-0429759	No	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				-5. Certificate of Status Desired -	\$8.75	
22		27				3. Certificate of Citatos Doubles —	Fee Re	equired
City & State		City & State	28			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Žip	Country	Zip	Cou	intry		8. This corporation owes the current year in		_
24	. 25	29	30			Personal Property Tax.	Yes	□No
	9. Name and Address of Curren	t Registered Agent	_:	04	N	10. Name and Address of New Registered	I Agent	
SW/E	NTEK, RICHARD A			81	Name			-
	STILLWRIGHT WAY			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
KEY	LARGO FL 33037			83				
	*			84	City		85 Zip (Code
	•			1	•	FI	L	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE								
-10	Signature, typed or printed name of registered ager			I Agent :	signature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	DRS IN 12
12.	DST OFFICERS AN	OFFICERS AND DIRECTORS 13.		TIF		ADDITIONS/CHANGES TO OFFICERS A	☐ Change	Addition
TITLE	SWENTEK, SANDRA N	C) Decere	1.2 NA			•	۵,۰	_
NAME	15 STILLWRIGHT WAY				ADDRESS			
STREET ADDRESS	KEY LARGO FL			TY-ST-				{
CITY-ST-ZIP	CP CP	☐ DELETE	2,1 TI		ZIP		☐ Change	Addition
NAME	SWENTEK, RICHARD A		2.2 NA					
	15 STILLWRIGHT WY				ADDRESS			
STREET ADDRESS	-KEY:LARGO:FL			ITY-ST	[
TITLE	D	☐ DELETE	3.† TT				[] Change	Addition
NAME	JEWETT, BRUCE		3.2 N					
STREET ADDRESS	777 BAYSWATER CT				ADDRESS .			}
CITY-ST-ZIP	WALLET COFFEE OA DAEGO		3.4. CITY-ST-ZIP		·		•	
TITLE			4.1 TF				☐ Change	Addition
			4. 2 N	IAME				
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CITY-ST-ZIP			4.4 CITY-ST-ZIP		ZIP		ť	
TITLE		☐ OELETE	5.1 TI			· ·	☐ Change	Addition
NAME	} · · · •		5.2 NA	AME			•	. }
STREET ADDRESS			5.3 ST	TREETA	ADDRESS	•		1
CITY-ST-ZIP		•	5.4 CI	TY-ST-	ZIP			
TITLE	,	☐ DELETE	6.1 TI	TLE			☐ Change	Addition
NAME	•		6.2 NA	AME				
STREET ADDRESS			6.3 ST	TREET A	ADDRESS	·		}

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an appearment with an address, with all other like empowered.

SIGNATURE