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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400026919 (8)

**OUTDOOR LIGHTING DESIGNS, INC.** 

Principal Place of Business

123 BW 12TH AVE. BOYNTON BEACH FL 33435 Mailing Address

123 SW 12TH AVE. BOYNTON BEACH FL 33435-5935

## FILED May 08 1997 8:00am Secretary of State



				1	
				3. Date Incorporated or Qualified 04/04/1994	a, Date of Last Report 09/19/1996
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 /23	SW 12TH AVE.	26 123 SW	12TH AVE.	65-0478282	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$9.75 Additional
City & State 23 BOYN	ITON BEACH, FL	28 BOYNTON BO	EACH, FL	6. Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be Added to Fees
24 Zip <b>3</b> 34		29 33435 36	Country  0 U.S.A.	This corporation has liability for intan     Florida Statutes	s 🔲 No
	g, Name and Address of Current	Registered Agent		<ol><li>Name and Address of New Register</li></ol>	ered Agent
	DDES, SCOTT P		81 Name	·	
	S.W. 12TH AVE.		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
BOY	INTON BEACH FL 33435			area ( .e. cox re-med to rec receptable)	
			83		
			84 City		85 Zip Code
					FL   S   Zip Code
11. Pursuant i office or re agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State c im familiar with, and accept the obligat	and 607.1508, Florida Statutes, if Florida. Such change was autions of, Section 607.0505, Florid	, the above-named con horized by the corpora da Statutes.	orporation submits this statement for the purporation's board of directors, I hereby accept the	ose of changing its registered appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent		Registered Agent signature requ	nuired when reinstating).	ATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PO	DELETE	1.1 TITLE	7.0071107070777700070 70 077102710	Change Addition
NAME	RHODES, SCOTT P		1.2 NAME		- • •
STREET ADDRESS	123 SW 12TH AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL 33435		1.4 CITY-S1-ZIP		
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME .			2.2 NAME		_ • •
STREET ADDRESS			2.3 STREET ADDRESS	•	
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3 4. CITY-ST-ZIP		
TITLE	***************************************	DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		V
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 IffLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS		•	5.3 STREET ADDRESS		
CITY-ST-ZIP					
TITLE		DELETE	5.4 CHY-ST-ZIP 6.1 TITLE		Change Addition
NAME		Deterie	6.2 NAME		En anguige En wooming
,, i			<b>1</b>		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		,	6.4 CITY - ST - 2IP		

I do 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 eath; 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 attachment with an address.