

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morton  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000012127 (3)

1. Corporation Name

FAN & LIGHTING OUTLET, INC



Principal Place of Business  
2683  
3675 W. NEW HAVEN AVENUE  
WEST MELBOURNE FL 32904

Mailing Address  
2683  
3675 W. NEW HAVEN AVENUE  
WEST MELBOURNE FL 32904

3. Date Incorporated or Qualified 02/10/1995  
3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number 59-3299528  
Applied For Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired  \$8.75 Additional Fee Required

23 City & State

28 City & State

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

24 Zip

25 Country

29 Zip

30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WHITE, DAVID W JR.,  
2683 3675 W. NEW HAVEN AVENUE  
WEST MELBOURNE FL 32904

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code FL

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, Sections 607.0502, Florida Statutes.

SIGNATURE

*David W. White*

5/18/96  
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHITE, DAVID W JR	1.2 NAME
STREET ADDRESS	3755 JUPITER BOULEVARD SE	1.3 STREET ADDRESS
CITY-ST-ZIP	PALM BAY FL 32901	1.4 CITY-ST-ZIP
TITLE	D <input checked="" type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATTISON, CHARLES W SR	2.2 NAME
STREET ADDRESS	205 E. MELBOURNE AVENUE	2.3 STREET ADDRESS
CITY-ST-ZIP	MELBOURNE FL 32901	2.4 CITY-ST-ZIP
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHITE, FLORENCE J.	3.2 NAME
STREET ADDRESS	3755 JUPITER BOULEVARD, SE	3.3 STREET ADDRESS
CITY-ST-ZIP	PALM BAY, FL. 32901	3.4 CITY-ST-ZIP
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME
STREET ADDRESS		4.3 STREET ADDRESS
CITY-ST-ZIP		4.4 CITY-ST-ZIP
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME
STREET ADDRESS		5.3 STREET ADDRESS
CITY-ST-ZIP		5.4 CITY-ST-ZIP
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME
STREET ADDRESS		6.3 STREET ADDRESS
CITY-ST-ZIP		6.4 CITY-ST-ZIP

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\*\*\*225.00

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, unchanged, or on an attachment with an address.

SIGNATURE:

*David White*

5/18/96

407-722-9112

DAVID WHITE, PRESIDENT

CR2E034 (12/95)