

APP 30 '97 07:51AM

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

FILED

May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra D. Northam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <i>P95000058900</i> 1. Corporation Name Northlight Productions, Inc.			
Principal Place of Business 770 W. Bay Street Winter Garden, FL 34787		Mailing Address Same As Above	
2. Principal Place of Business Same As Above	2a. Mailing Address Same As Above	3. Date Incorporated or Qualified 27 July 95	3a. Date of Last Report May 1996
21. Suite, Apt. #, etc. City & State Zip Country	26. Suite, Apt. #, etc. City & State Zip Country	4. FEI Number 59-3331980	Applied For Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☒ No			
9. Name and Address of Current Registered Agent Mr. Martin Stamp Kilgore, Pearlman, Gardner, Ornstein & Stamp PA 940 Highland Ave. Orlando, FL 32803		10. Name and Address of New Registered Agent 01 Name 02 Street Address (P.O. Box Number is Not Acceptable) 03 04 City FL 05 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 _____ Signature typed or printed name of registered agent and title of office (NOTE: Registered Agent's signature required when re-appointing)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE	President Robert J. LeFort Jr. 4701 NE Spinaker Point Stuart, FL 34996	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE	Secretary Laurie G. Kohlbeins 111 Kenilworth Road Villanova, PA 19085	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE	Treasurer Harold E. Roberts 221 Harbor Dr. Winter Garden, FL 34787	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP ☐ Change ☐ Addition	
14. I do hereby certify that the information appearing on 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 is supplemental annual report 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 the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 as changed or on an attachment with an address.		700002175857 -05/13/97--01003--024 ***165.00	
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		4/30/97	

CR-0001 (08/96)