

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000084213

FILED
Jan 07, 2008
Secretary of State

Entity Name: CITY LITE DEVELOPMENT CORPORATION

Current Principal Place of Business:

2992 DAY RD
DELTONA, FL 32738 US

New Principal Place of Business:

Current Mailing Address:

POB 181
BREESE, IL 62230 US

New Mailing Address:

FEI Number: 65-0648216 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLEMENTS, IVAN K ESQ
632 N WOODLAND BLVD., STE 3
DELAND, FL 32720 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NEWKIRK, MARK
Address: 259 GREENE CEMETARY RD
City-St-Zip: POCAHONTAS, IL 62275

Title: VPD () Delete
Name: NEWKIRK, MIKE
Address: 850 WILKENS ON TERRACE APT 56
City-St-Zip: BOWLING GREEN, KY 42103

Title: ST () Delete
Name: LAMPE, REAGAN
Address: 1074 VOSSCLARE LANE
City-St-Zip: BREESE, IL 62230

Title: D () Delete
Name: NEWKIRK, KENT
Address: 491 JEFFERSON ST
City-St-Zip: CARLYLE, IL 62231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: NEWKIRK, MIKE
Address: 910 BETHEL LANE
City-St-Zip: BOWLING GREEN, KY 42103

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARK NEWKIRK

PD

01/07/2008

Electronic Signature of Signing Officer or Director

_____ Date