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Feb 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000094853 (5)

1. Corporation Name
FLORIDA LIGHT SOURCE, INC.



Principal Place of Business

2611 KAMAL PARKWAY
CAPE CORAL FL 33904

Mailing Address

2611 KAMAL PARKWAY
CAPE CORAL FL 33904-2747

3. Date Incorporated or Qualified

01/01/1996

3a. Date of Last Report

4. FEI Number

65-0646590

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

21 869 SE 47TH ST.

2a. Mailing Address

26 869 SE 47TH ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 CAPE CORAL, FL

City & State

28 CAPE CORAL, FL

Zip

24 33904

Country

25 USA

Zip

29 33904

Country

30 USA

9. Name and Address of Current Registered Agent

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD
NAME WEST, RICHARD A
STREET ADDRESS 2811 KAMAL PARKWAY
CITY-ST-ZIP CAPE CORAL FL 33904

☐ DELETE

TITLE VSD
NAME WEST, KAREN A
STREET ADDRESS 2811 KAMAL PARKWAY
CITY-ST-ZIP CAPE CORAL FL 33904

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
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CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT
1.2 NAME WEST, RICHARD A.
1.3 STREET ADDRESS 4925 NASSAU CT.
1.4 CITY-ST-ZIP CAPE CORAL, FL 33904

☒ Change

☐ Addition

2.1 TITLE V. PRESIDENT
2.2 NAME WEST, KAREN A.
2.3 STREET ADDRESS 4925 NASSAU CT.
2.4 CITY-ST-ZIP CAPE CORAL, FL 33904

☒ Change

☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. 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 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. If the name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard A. West
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)