

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000008664

FILED  
Apr 17, 2008  
Secretary of State

Entity Name: AURORA OUTDOOR LIGHTING, INC.

**Current Principal Place of Business:**

12245 GARDEN LAKE CIR.  
ODESSA, FL 33556 US

**New Principal Place of Business:**

**Current Mailing Address:**

13805 VACATION LANE  
ODESSA, FL 33556 US

**New Mailing Address:**

P.O. BOX 166  
ODESSA, FL 33556 US

FEI Number: 59-3356162      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BERNARDO, THOMAS C  
12245 GARDEN LAKE CIRCLE  
ODESSA, FL 33556 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: P ( ) Delete  
Name: BERNARDO, THOMAS C  
Address: 12245 GARDEN LAKE CIRCLE  
City-St-Zip: ODESSA, FL 33556

Title: V ( ) Delete  
Name: BERNARDO, SELINA M  
Address: 12245 GARDEN LAKE CIRCLE  
City-St-Zip: ODESSA, FL 33556

Title: S ( ) Delete  
Name: MCPHEE, CHRISTOPHER J  
Address: 13805 VACATION LANE  
City-St-Zip: ODESSA, FL 33556

Title: T ( ) Delete  
Name: PILKAY, JEFFREY A  
Address: 15120 20TH ST. N.  
City-St-Zip: LUTZ, FL 33549

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: THOMAS BERNARDO

OWNE

04/17/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date