

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

FILED

Apr 22 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P97000074569 (9)

1. Corporation Name  
SIGHT & SOUND, INC.

Principal Place of Business  
403 LOUIS STREET  
LEESBURG FL 34748

Mailing Address  
403 LOUIS STREET  
LEESBURG FL 34748



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
08/27/1997

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

P.O. BOX 491060

Suite, Apt. #, etc.

27

City & State

28

LEESBURG, FL

29

34749-1060

30

U.S.A.

4. FEI Number

59-3489716

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 owes or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PHILLIPS, ARTHUR E  
10 WHITEWOOD ST.  
CRYSTAL RIVER FL 34448

10. Name and Address of New Registered Agent

81 Name

DEBORA GALE SHEFFIELD

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

403 LOUIS STREET

83

84 City

LEESBURG

FL

85 Zip Code

34748

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 reinstating)

DATE

DEBORA GALE SHEFFIELD 4-13-98

12. OFFICERS AND DIRECTORS

TITLE

REGISTERED AGENT

☒ DELETE

NAME

ARTHUR PHILLIPS

STREET ADDRESS

10 WHITEWOOD ST.

CITY-ST-ZIP

CRYSTAL RIVER FL 34448

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

CEO

☐ Change

☒ Addition

1.2 NAME

BRIAN E. SHEFFIELD

1.3 STREET ADDRESS

403 LOUIS ST.

1.4 CITY-ST-ZIP

LEESBURG, FL 34748

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change

☐ Addition

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE

☐ Change

☐ Addition

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

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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 registered agent; and that this approval is required by Chapter 607, Florida Statutes, and that my name appears in  
Block 12 or Block 13 if checked, or in an additional block if necessary.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

BRIAN E. SHEFFIELD 4-13-98 (352)

CR2E034 (10/97)