May 12, 1999 8:00 am Secretary of State

05-12-1999 90002 038 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9800006379

1. Corporation Name

CORPORATE LIGHTDATORS INC

00111 01	WIE EIGOD/II Ollo, 1140.								
Principal Place of Business Mailing Address						-		Mili n a ti ne blebt s	##1# I#11 I##1
4016 RUDDER WAY 4016 RUDDER WAY									
NEW PORT RICHEY FL 34652 NEW PORT RICHEY FL 34652									
- · · · · · · · · · · · · · · · · · · ·				DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualifed			
						01/21/1998			
Principal Place of Business 2a. Mailing Address						4. FEI Number		<u> </u>	olied For
21 26						59-3488148	· · · · · · · · · · · · · · · · · · ·		Applicable
Suite, Apt. #, etc.						5. Certificate of Status Desired		\$8.75 A Fee Red	
22		27							`
City & State	e	City & State			6. Election Campaign Financing		\$5.00		
23		28				Trust Fund Contribution		Added to	rees
Zip	——————————————————————————————————————		- '	Country		8. This corporation owes the curre	ent year Inta		□No
24	25 29 30		<u> </u>			Personal Property Tax. 10. Name and Address of New R	onistored		
Name and Address of Current Registered Agent				īT	Name	10. Name and Address of New N	egistered	-yent	
BELCHER, WILLIAM D JR				L		- /D O. Day Missahan in Mat Assault	hia\		
4016 RUDDER WAY			82	Ĺ	Street Addre	ess (P.O. Box Number is Not Accepta	ibie)		
NEW PORT RICHEY FL 34652			83	1					
				†	City		FL	85 Zip C	ode
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligat	of Florida. Such change was auth ions of, Section 607.0505, Florida	orized by a Statutes	/ tr s.	he corporation	n's board of directors. I hereby accep	t the appoir	ntment as rec	pistered
40	Signature, typed or printed name of registered agent		13.	ent s	signature required	ADDITIONS/CHANGES TO OF		D DIRECTO	PS IN 12
12.	PVST OFFICERS ANI	D DIRECTORS DELETE	1.1 TITLE		T	ADDITIONS/CHANGES TO OF	TOLINO AIN	[] Change	Addition
TITLE			1.2 NAME						
NAME				1.3 STREET ADDRESS					
STREET ADDRESS					1				
CITY-ST-ZIP			1.4 CITY-5 2.1 TITLE	\$1	ZIP			Change	☐ Addition
TITLE	D BELOUED HEANING							_ ,	
NAME	BELCHER, JILANNE 4016 RUDDER WAY		2.2 NAME 2.3 STREET		ODDECC				1
STREET ADORESS			1		1				
CITY-ST-ZIP TITLE	D	☐ DELETE	2.4 CITY-		ZIP			Change	Addition
NAME	BELCHER, WILLIAM D JR		3.2 NAME						_
STREET ADDRESS	4016 RUDDER WAY		3.3 STREET		ADDRESS				
	NEW PORT RICHEY FL 34652		3.4. CITY-						
CITY-ST-ZIP	HEN FORT MICHEL TE 34032	☐ DELETE	4.1 TITLE		-21			Change	Addition
NAME			4.1 HILE					_ •	
STREET ADDRESS	!			4.3 STREET ADDRESS					
	•			I.4 CITY-ST-ZIP					
CITY-ST-ZIP TITLE			4.4 C/TY-S				· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			5.1 INLE						"
NAME			5.3 STREE		DORESS				
SINCE I NUUNESS					1				

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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ DELETE

WILLIAM D. BEICHER IN

1727)844-5747

Addition