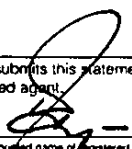


FILED
Mar 27, 2007 8:00 am
Secretary of State

03-16-2007 90030 046 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000016220		
1. Entity Name S-LITE, INC.		
Principal Place of Business 25080 GOLDCREST DR. BONITA SPRINGS, FL 34134	Mailing Address 25080 GOLDCREST DR. BONITA SPRINGS, FL 34134	
DO NOT WRITE IN THIS SPACE		
		02102007 No Chg-P CR2E034 (11/05)
4. FEI Number 59-3561449		Applied For Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent HAYNES, DEREK 25080 GOLDCREST DR BONITA SPRINGS, FL 34134		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE:  PRESIDENT 21. MAR 07 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renewing) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD HAYNES, DEREK PO BOX 367989 BONITA SPRINGS, FL 34136	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS JENKINS, STUART PO BOX 367989 BONITA SPRINGS, FL 34136	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
DO NOT WRITE IN THIS SPACE		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE:  PRESIDENT 21. MAR 07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # DEREK HAYNES, PRES.		