2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000029392

1. Entity Name

FILED Mar 05, 2005 08:00 AM Secretary of State

THE SMART LITE COMPANY					
2510 KIRBY AVE NE 2 #104 #	iālīng Address 2510 KIRBY AVĒ NE ¥104 PALM BAY, FL 32905			.	See iniche (inic instrumentano si inic
	and designed the second of	August Charles Charles of August (
DO NOT WRITE IN THIS SPACE		^E	03022005 No Chg-P CR2E034 (10/03)		
		4. FEI Number		Applied For	
			65-0985944		Not Applicable
			5. Certificate of Status	Desired 🔲	\$8.75 Additional Fee Required
6. Name and Address of Current Regis	tered Agent			ACA GOOD AND A STORY	The Transfer was placed and
RIDNER, NANCY I 2510 KIRBY AVE N.E. STE 104 PALM BAY, FL 32905			DO NO		
8. The above named entity submits this statement for the pathe obligations of registered agent. CONTROL CONT	urpose of changing its registere	ed office or register	ed agent, or both, in the S	tate of Florida. Ta	ım familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and fills to	f applicable (NOTE Registered	Agent signature required	when reinstating)	DAT	E
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Finant Trust Fund Contribution.	· •.	00 May Be ed to Fees	-	
10. OFFICERS AND DIREC	TORS			Market & Brack to the Topics	

TITLE RIDNER, GEORGE D SR NAME STREET ADDRESS 543 AMERICAN BLVD NW CITY-ST-ZIP PALM BAY, FL 32907 TITLE RIDNER, NANCY I NAME 03/05/05-80007-024 150.00 STREET ADDRESS 543 AMERICAN BLVD NW CITY-ST-ZIP PALM BAY, FL 32907 TITLE VΡ REILLY, ANDREW P NAME STREET ADDRESS 1111 GLEN COVE AVE NW DO NOT WRITE CITY - ST - ZIP PALM BAY, FL 32907 TITLE IN THIS SPACE MITCHELL, LARRY T NAME STREET ADDRESS 656 AMERICANAN BLVD NW PALM BAY, FL 32907 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certily 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 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 this 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:

OUCY V. PUBLIC NAME OF SIGNING OFFICER OF DIRECTOR T. Ridger

321-956-2552_ Dayline Phone #