



FILED

Apr 21 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Apr 21 1997 8:00am Secretary of State	
DOCUMENT # S24452 (2)					
1. Corporation Name LIGHTNING LUBE, INC.					
Principal Place of Business 1313 NE 5TH AVENUE CRYSTAL RIVER FL 34426		Mailing Address 1313 NE 5TH AVENUE CRYSTAL RIVER FL 34426-3213			
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/10/1991	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		3a. Date of Last Report 05/01/1996	
22 City & State		27 City & State		4. FEI Number 59-3046283	
23 Zip		28 Zip		Applied For Not Applicable	
24 Country		30 Country		5. Certificate of Status Desired \$8.75 Additional Fee Required	
9. Name and Address of Current Registered Agent MORRISON, JOHN B. JR. 1313 NE 5TH AVENUE CRYSTAL RIVER FL 32629				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
10. Name and Address of New Registered Agent				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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.				81 Name	
SIGNATURE				82 Street Address (P.O. Box Number is Not Acceptable)	
(NOTE: Registered Agent signature required when reinstating)				83	
DATE				84 City	
12. OFFICERS AND DIRECTORS				85 Zip Code	
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				FL	
1.1 TITLE				Change Addition	
1.2 NAME				Change Addition	
1.3 STREET ADDRESS				Change Addition	
1.4 CITY - ST - ZIP				Change Addition	
2.1 TITLE				Change Addition	
2.2 NAME				Change Addition	
2.3 STREET ADDRESS				Change Addition	
2.4 CITY - ST - ZIP				Change Addition	
3.1 TITLE				Change Addition	
3.2 NAME				Change Addition	
3.3 STREET ADDRESS				Change Addition	
3.4 CITY - ST - ZIP				Change Addition	
4.1 TITLE				Change Addition	
4.2 NAME				Change Addition	
4.3 STREET ADDRESS				Change Addition	
4.4 CITY - ST - ZIP				Change Addition	
5.1 TITLE				Change Addition	
5.2 NAME				Change Addition	
5.3 STREET ADDRESS				Change Addition	
5.4 CITY - ST - ZIP				Change Addition	
6.1 TITLE				Change Addition	
6.2 NAME				Change Addition	
6.3 STREET ADDRESS				Change Addition	
6.4 CITY - ST - ZIP				Change Addition	
14. I do 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 as an attachment with an address.					
SIGNATURE: [Signature] DAN B. MORRISON, JR. 3/24/97 352 795-4193					

CR2E034 (9/96)