

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 23, 2004 08:00 AM
Secretary of State

DOCUMENT # S24710

1. Entity Name
CITRUS LIGHTING-VAC & CEILING FANS, INC.



Principal Place of Business

8449 SW HWY 200
SUITE 141-143
OCALA, FL 34481 US

Mailing Address

8449 SW HWY 200
SUITE 141-143
OCALA, FL 34481 US



03182004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3043595

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LAPHAM, RICHARD B.
19794 SW 93RD LANE
DUNNELLON, FL 34432

**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

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

(NOTE: Registered Agent signature required when reinstating)

4/20/04
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

UN00000127225
04/23/04-80064-017 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	LAPHAM, RICHARD B.
STREET ADDRESS	19794 SW 93RD LANE
CITY-ST-ZIP	DUNNELLON, FL 34432

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/04
Date

(352)854-0018
Daytime Phone #