

FILED

May 01, 2008 08:00 AM
Secretary of State**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

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	
DO NOT WRITE IN THIS SPACE			
		04302006 No Chg-P CR2E034 (11/06)	
4. FEI Number 69-3043595		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LAPHAM, RICHARD B. 4770 SW 95TH STREET OCALA, FL 34476		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 (Mandatory) Registered Agent signature required when changing? DATE: _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		U00000933412 05/28/08-80027-025 150.00	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LAPHAM, RICHARD B. 4770 SW 95TH STREET OCALA, FL 34476		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 110, 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 all officers, with all other the employees.			
SIGNATURE: <u><i>Richard B. Lapham</i></u>		Date: <u>4/30/08</u> (30) 854-0018	
SIGNATURE AND TYPE OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR		Date Daytime Phone *	