

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31678

Entity Name: EDISON FESTIVAL OF LIGHT, INC.**Current Principal Place of Business:**1524 JACKSON STREET
FORT MYERS, FL 33901**Current Mailing Address:**P.O. BOX 339
FORT MYERS, FL 33902**FEI Number:** 65-0118122**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILTSHIRE, WILLIAM B
5249 SUMMERLIN COMMONS BLVD
SUITE 100
FORT MYERS, FL 33907 US*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.***SIGNATURE:** WILLIAM B WILTSHIRE

02/01/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	IPP
Name	SUAREZ, ANN
Address	1524 JACKSON STREET
City-State-Zip:	FORT MYERS FL 33901

Title	PRESIDENT
Name	ANDERSON, KEVIN
Address	1524 JACKSON STREET
City-State-Zip:	FORT MYERS FL 33901

Title	VP
Name	EDSEL, GREGORY
Address	1524 JACKSON STREET
City-State-Zip:	FORT MYERS FL 33901

Title	TREASURER
Name	MCGEE, JOHN
Address	1524 JACKSON STREET
City-State-Zip:	FORT MYERS FL 33901

Title	SPECIAL DIRECTOR
Name	SHERKUS, FRANK
Address	1524 JACKSON STREET
City-State-Zip:	FORT MYERS FL 33901

Title	SPECIAL DIRECTOR
Name	SIZEMORE, STEVE
Address	1524 JACKSON STREET
City-State-Zip:	FORT MYERS FL 33901

Title	SPECIAL DIRECTOR
Name	DAVIS, ANDREW
Address	1524 JACKSON STREET
City-State-Zip:	FORT MYERS FL 33901

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANDERSON , KEVIN

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02/01/2017

Electronic Signature of Signing Officer/Director Detail

Date