

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 24, 2004  
Secretary of State**

DOCUMENT# 730668

Entity Name: LIGHTHOUSE OF BROWARD COUNTY, INC.

**Current Principal Place of Business:**

650 NORTH ANDREWS AVENUE  
FT. LAUDERDALE, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

650 NORTH ANDREWS AVENUE  
FT. LAUDERDALE, FL 33311 US

**New Mailing Address:**

FEI Number: 59-1650909      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COLVIN, SUSAN  
650 N ANDREWS AVENUE  
FT LAUDERDALE, FL 33311 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: ED ( ) Delete  
Name: BECOVSKY, ROSALYN  
Address: 650 N ANDREWS AVE  
City-St-Zip: FT LAUDERDALE, FL

Title: SD ( ) Delete  
Name: MOLNAR, SUSAN  
Address: 1350 W. BROWARD BLVD.  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: PD ( ) Delete  
Name: MILLER, HARLEY  
Address: 614 S FEDERAL HWY  
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: T ( ) Delete  
Name: DISMAS, JAMES  
Address: 2841 N OCEAN BLVD #1907  
City-St-Zip: FT LAUDERDALE, FL 33308

Title: VP ( ) Delete  
Name: MCINTYRE, R. HART  
Address: 450 E. COPANS RD.  
City-St-Zip: POMPANO BEACH, FL 33064

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ED (X) Change ( ) Addition  
Name: GENT, KATHLEEN  
Address: 650 N ANDREWS AVE  
City-St-Zip: FT LAUDERDALE, FL 33311 US

Title: SD (X) Change ( ) Addition  
Name: MOLNAR, SUSAN  
Address: 1350 W. BROWARD BLVD.  
City-St-Zip: FORT LAUDERDALE, FL 33311 US

Title: VP (X) Change ( ) Addition  
Name: KING, SUSAN  
Address: 2124 BAYVIEW DRIVE  
City-St-Zip: FT. LAUDERDALE, FL 33305 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: MCINTYRE, R. HART  
Address: 450 E. COPANS RD.  
City-St-Zip: POMPANO BEACH, FL 33064

Title: ML ( ) Change (X) Addition  
Name: LEWIS, LINDA  
Address: 600 FAIRWAY DR. # 109  
City-St-Zip: DEERFIELD BCH, FL 33441 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: KATHLEEN GENT

ED

05/24/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date