2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#730683

Entity Name: LIGHTHOUSE BONSAI SOCIETY, INC.

FILED Feb 05, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9085 GREEN MEADOWS WAY PALM BEACH GARDENS, FL 33418 US **Current Mailing Address: New Mailing Address:** 9085 GREEN MEADOWS WAY US PALM BEACH GARDENS, FL 33418 FEI Number: 65-0092087 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FOURSA, VLADIMIR 9085 GREEN MEADOWS WAY PALM BEACH GARDENS, FL 33418 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FOURSA, VLADIMIR Name: Name: 9085 GREEN MEADOWS WAY Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33418 US City-St-Zip: Title: Title: () Delete () Change () Addition Name: DUKE, LARRY Name: Address: 10045 W BELVEDERE RD Address: City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: Title: () Delete Title: () Change () Addition ORSOLEK, JOAN Name: Name: Address: 7834 N.W. 78TH AVE Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ORSOLEK, STANLEY Name: 7834 NW 78TH AVE Address: Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip: Title: () Delete Title: () Change () Addition STORKE, WILLIAM Name: Name: 800 SW 21ST STREET Address: Address: City-St-Zip: BOCA RATON, FL 33486 City-St-Zip: Title: () Delete Title: () Change () Addition HENDERSON, GEORGE Name: Name: Address: 2308 NE 20TH STREET Address: FT LAUDERDALE, FL 33305 City-St-Zip: City-St-Zip:

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: VLADIMIR FOURSA D 02/05/2004