2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2008
Secretary of State

DOCUMENT# 730683

Entity Name: LIGHTHOUSE BONSAI SOCIETY, INC.

Current Principal Place of Business:

9085 GREEN MEADOWS WAY
PALM BEACH GARDENS, FL 33418 US

New Principal Place of Business:

Current Mailing Address:

9085 GREEN MEADOWS WAY
PALM BEACH GARDENS, FL 33418 US

New Mailing Address:

FEI Number: 65-0092087 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FOURSA, VLADIMIR
9085 GREEN MEADOWS WAY
PALM BEACH GARDENS, FL 33418 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:	D	( ) Delete
Name:	FOURSA, VLADIMIR	
Address:	9085 GREEN MEADOWS WAY	
City-St-Zip:	PALM BEACH GARDENS, FL 33418 US	
Title:	D	( ) Delete
Name:	ROSENBERG, RITA	
Address:	8070 FLORENZA DR.	
City-St-Zip:	BOYNTON BEACH, FL 33437	
Title:	D	( ) Delete
Name:	MANDEL, NORMAN	
Address:	6282 WINFIELD BLVD.	
City-St-Zip:	MARGATE, FL 33063	
Title:	D	( ) Delete
Name:	STORKE, WILLIAM	
Address:	800 SW 21ST STREET	
City-St-Zip:	BOCA RATON, FL 33486	
Title:	D	( ) Delete
Name:	STORKE, JACQUELINE	
Address:	800 SW 21ST STREET	
City-St-Zip:	BOCA RATON, FL 33486	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NORMAN MANDEL DIR 05/03/2008
Electronic Signature of Signing Officer or Director — Date