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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **765421** **(3)**

1. Corporation Name

APOSTOLIC LIGHTHOUSE TABERNACLE CHURCH OF DUNEDIN, INCORPORATED

Principal Place of Business	Mailing Address
2601 COUNTY RD.#1 PO BOX 183 DUNEDIN FL 34697-0183	2601 COUNTY RD.#1 PO BOX 183 DUNEDIN FL 34697-0183

3. Date Incorporated or Qualified: 10/11/1982

4. FEI Number: 59-2073833 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

LAUGHLIN, PAUL R.
1820 SHIRLEY CT.
DUNEDIN FL 34697-7183

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	COFFEY, VICTOR		1.2 NAME	
STREET ADDRESS	1552 GLEN HOLLOW LN N		1.3 STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN FL		1.4 CITY-ST-ZIP	
TITLE	PD	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	LAUGHLIN, PAUL R		2.2 NAME	
STREET ADDRESS	1820 SHIRLEY CT		2.3 STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN FL		2.4 CITY-ST-ZIP	
TITLE	T	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	LESTER, LEONARD J		3.2 NAME	
STREET ADDRESS	2072 BELCHER RD		3.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL		3.4 CITY-ST-ZIP	
TITLE	S	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	LAUGHLIN, SHIRLEY		4.2 NAME	
STREET ADDRESS	1820 SHIRLEY CT		4.3 STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN FL		4.4 CITY-ST-ZIP	
TITLE	T	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	FITZPATRICK, DALE		5.2 NAME	
STREET ADDRESS	966 CROSLEY DR		5.3 STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN FL		5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E037 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: PAUL R LAUGHLIN (D) Paul R Laughlin (D) 4/22/98 (813) 785-3840
SIGNATURE AND TYPED OR PRINTED NAME OF EXECUTING OFFICER OR DIRECTOR Date Daytime Telephone Number