2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 19, 2002 8:00 am
Secretary of State
05-07-2002 90378 011 ****61.25

DOCUMENT # 765421

1. Entity Name

PENTECOSTAL LIGHTHOUSE OF DUNEDIN, INC.

Principal Place of Business	Mailing Address
2801 COUNTY RD.#1 PO BOX 183 DUNEDIN FL 34697-0183	2801 COUNTY RD.#1 PO BOX 183 DUNEDIN FL 34697-0183

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2801 COUNTY RD #1	P.O. BOX 746
Suite, Apt. #, etc.: P.O. BOX 746	Suite, Apt. #, etc.: 2801 COUNTY RD #1
City & State: DUNEDIN, FL	City & State: DUNEDIN, FL
Zip: 34697-0746 Country: USA	Zip: 34697-0746 Country: USA

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

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FITZPATRICK, DALE 966 CROSLEY DR. DUNEDIN FL 34698-7183	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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

FILE NOW: FEE IS $61.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LAUGHLIN, PAUL R 1820 SHIRLEY CT DUNEDIN FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LAUGHLIN, SHIRLEY 1820 SHIRLEY CT DUNEDIN FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Laughlin, Shirley 1500 COUNTY RD #1 - LOT 280 DUNEDIN, FL 34697 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T FITZPATRICK, DALE 966 CROSLEY DR DUNEDIN FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Fitzpatrick, Dale 966 Crosley Dr. Dunedin, FL 34697 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SMITH, KEITH 27466 US HWY 19N CLEARWATER FL 34621	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Fitzpatrick, Wanda 966 Crosley Drive Dunedin, FL 34698 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Kinnecom, Robert 997 Santa Monica Ct Dunedin, FL 34698 ☐ Change ☒ Addition

CR2E037 (9/01)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-02 (727) 733-5603
Date Daytime Phone #