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FILED  
May 07 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **769636** (2)

1. Corporation Name

**LIGHTHOUSE EVANGELISTIC ASSOCIATION, INC.**



Principal Place of Business

Mailing Address

**3950 DIXIE HWY. N.E.  
P.O. BOX 201  
PALM BAY FL 32905**

**3950 DIXIE HWY. N.E.  
P.O. BOX 201  
PALM BAY FL 32905-3678**

2. Principal Place of Business

2a. Mailing Address

**21 2951 Hessey Ave. NE**

**25 P.O. Box 60201**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**22 Unit 6**

**27**

City & State

City & State

**23 Palm Bay, FL**

**28 Palm Bay, FL**

Zip

Country

Zip

Country

**24 32905**

**25 Brevard**

**29 32906-0201**

**30 Brevard**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

**07/29/1983**

3a. Date of Last Report

**02/19/1996**

4. FEI Number

**59-2314055**

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**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☐ No

10. Name and Address of New Registered Agent

**WHITEHEAD, LUTHER  
3950 DIXIE HWY., NE  
PALM BAY FL 32905**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 **1753 Biddle St. NE**

84 City **Palm Bay**

**FL**

85 Zip Code **32907**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **WHITEHEAD, LUTHER**

STREET ADDRESS **3950 NE DIXIE HWY**

CITY-ST-ZIP **PALM BAY FL**

TITLE **VSD** ☐ DELETE

NAME **WHITEHEAD, JANICE**

STREET ADDRESS **3950 NE DIXIE HWY**

CITY-ST-ZIP **PALM BAY FL**

TITLE **D** ☐ DELETE

NAME **KISER, MAXENE**

STREET ADDRESS **489 LA LUZ BLVD #312**

CITY-ST-ZIP **LEBANON OH**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

**1753 Biddle St N**

**Palm Bay, FL 32907**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

**1753 Biddle St NE**

**Palm Bay, FL 32907**

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do 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.

CR2E037 (9/96)