

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -7 AM 11:52

DOCUMENT # L08150 (9)

1. Corporation Name

LIGHTHOUSE REALTY OF PINE ISLAND, INC.

Principal Place of Business

26171 HICKORY BLVD.
STE. 3A
BONITA SPRINGS FL 33923

Mailing Address

26171 HICKORY BLVD.
STE. 3A
BONITA SPRINGS FL 33923

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/08/1989

3a. Date of Last Report

09/08/1994

4. FEI Number

65-0134521

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

2. Principal Place of Business

21 28165 Meadow Lark Ln.

Suite, Apt. #, etc.

2a. Mailing Address

26 28165 Meadow Lark Ln

Suite, Apt. #, etc.

City & State

23 Bonita Springs FL

Zip

24 33923

Country

25 Lee

City & State

28 Bonita Springs FL

Zip

29 33923

Country

30 Lee

9. Name and Address of Current Registered Agent

VOSSLER, R. PETE
26171 HICKORY BLVD.
UNIT 3A
BONITA SPRINGS FL 33923

10. Name and Address of New Registered Agent

81 Name

Vossler R. Pete

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

28165 Meadow Lark Ln

83

84 City

Bonita Springs

FL

85 Zip Code

33923

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE:

R. Pete Vossler

R. Pete Vossler

President

3-23-1995

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME VOSSLER, R. PETER
STREET ADDRESS 26171 HICKORY BLVD., # UNIT 3A
CITY-ST-ZIP BONITA SPRINGS FL 33923

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

PD
Vossler R. Pete
28165 Meadow Lark Ln
BONITA SPRINGS FL 33923

☒ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

R. Pete Vossler

R. Pete Vossler

3-23-1995

(Signature and typed or printed name of signing officer or director)

Date

(Signature and typed or printed name of)