2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005316

Entity Name: LIGHTHOUSE HOMESCHOOLERS, INC.

FILED Jan 29, 2009 Secretary of State

Current Principal Place of Business:			Now Bring	New Principal Place of Business:	
817 BUTTE	ERCUP DRIVE D, FL 33801		New Pillic	ipai Flace of Busiliess.	
Current Ma	ailing Addres:	s:	New Mailir	New Mailing Address:	
P.O. BOX 6 HIGHLAND	31 CITY, FL 338	46			
FEI Number: 01-0736930 FEI Number Applied For () FEI Number			El Number Not Appli	umber Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
817 BUTTE	ERRY, KATHY ERCUP DRIVE), FL 33801				
The above in the State	named entity s of Florida.	ubmits this statement for the purp	ose of changing it	s registered office or registered agent, or both,	
SIGNATURE:					
	Electroni	c Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () COARSEY, SON 585 PINECREST BARTOW, FL 3	T DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () HART, STEPHAN 412 ANDERSON AUBURNDALE, I	I DR	Title: Name: Address: City-St-Zip:	D (X) Change () Addition MARDAVICH, KELLY 1629 CRYSTALVIEW TRAIL LAKELAND, FL 33801	
Title: Name: Address: City-St-Zip:	S () ONHEISER, MEI 823 W LAKE EL WINTER HAVEN	BERT DR NE	Title: Name: Address: City-St-Zip:	S (X) Change () Addition WHITING, JULIE 474 AMETHYST AVE. AUBURNDALE, FL 33823	
Title: Name: Address: City-St-Zip:	JOHNSON, JEAN	ON HEIGHTS DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () DEROUEN, EST 6911 MARLYN I LAKELAND, FL	PRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () JONES, CHERIE 10225 QUINN R POLK CITY, FL	D	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition HOSEGOOD, STACEY 3137 W. BELLA VISTA ST. LAKELAND, FL 33810	

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: JULIE WHITING S 01/29/2009