

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004743

FILED
Mar 23, 2004
Secretary of State**Entity Name:** ALLEN'S LIGHTHOUSE, INC.**Current Principal Place of Business:**580 GEORGE ENGRAM BLVD.
DAYTONA BEACH, FL 32120**New Principal Place of Business:****Current Mailing Address:**580 GEORGE ENGRAM BLVD.
DAYTONA BEACH, FL 32120**New Mailing Address:****FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROBERTS, NELLA
945 GLENWOOD STREET
DAYTONA BEACH, FL 32114 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD () Delete
Name: GRAHAM, CHARLES E
Address: 320 N. LINCOLN STREET
City-St-Zip: DAYTONA BEACH, FL 32114Title: VD () Delete
Name: GORDON, NORMA REV.
Address: 1139 EDITH DRIVE
City-St-Zip: DAYTONA BEACH, FL 32114Title: SD () Delete
Name: THOMAS, ANN
Address: 519 MARK AVENUE
City-St-Zip: DAYTONA BEACH, FL 32114Title: TD () Delete
Name: PLOWDEN, TONY
Address: 5049 DORAVILLE DRIVE
City-St-Zip: PORT ORANGE, FL 32114**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHARLES E. GRAHAM

PD

03/23/2004

Electronic Signature of Signing Officer or Director

Date