

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008 8:00 am
Secretary of State

04-29-2008 90087 002 ****61.25



DOCUMENT # N05000008098				1. Entity Name LIGHTHOUSE PLAZA PROPERTY OWNERS ASSOCIATION, INC.	
Principal Place of Business 2801 SOUTH BAY ST. EUSTIS, FL 32726		Mailing Address 2801 SOUTH BAY ST. EUSTIS, FL 32726			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address		04232008 Chg-NP CR2E037 (12/06)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-3777664 <input type="checkbox"/> Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SUMMERS, GARY L 380 W. ALFRED ST. TAVARES, FL 32778-3298			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ Signature, typed or printed name of registered agent and title if applicable.					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '08		
TITLE	VPD	<input checked="" type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KNORR, KEN R		NAME	Ziler, C Joseph	
STREET ADDRESS	2801 EAST BAY STREET		STREET ADDRESS	2801 South Bay Street	
CITY-ST-ZIP	EUSTIS, FL 32726		CITY-ST-ZIP	Eustis, Fl 32726	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUNN, LARRY B		NAME	Nagle, Brian W.	
STREET ADDRESS	2801 SOUTH BAY STREET		STREET ADDRESS	2801 South Bay Street	
CITY-ST-ZIP	EUSTIS, FL 32726		CITY-ST-ZIP	Eustis, Fl 32726	
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PARROW, ALAN A		NAME	Nordstrom, Steven R.	
STREET ADDRESS	2801 SOUTH BAY ST.		STREET ADDRESS	2801 South Bay Street	
CITY-ST-ZIP	EUSTIS, FL 32726		CITY-ST-ZIP	Eustis, Fl 32726	
TITLE	SD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEDFORD, MARTHA E		NAME		
STREET ADDRESS	2801 SOUTH BAY STREET		STREET ADDRESS		
CITY-ST-ZIP	EUSTIS, FL 32726		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	DeLuca, Tony P.	
STREET ADDRESS			STREET ADDRESS	2801 South Bay Street	
CITY-ST-ZIP			CITY-ST-ZIP	Eustis, Fl 32726	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Martha Ledford</i>			Date: 4/22/08		Daytime Phone #: 352-483-8000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #