2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# N12005

Entity Name: FLORIDA LIGHTHOUSE TABERNACLE, INC.

Current Principal Place of Business:

8400 COMMERCIAL WAY
WEEKI WACHEE, FL 34613 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5238
SPRING HILL, FL 34611 US

New Mailing Address:

FEI Number: 59-2902490 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CANNON, RONNIE
12537 MOON RD.
BROOKSVILLE, FL 34613 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: CANNON, RONNIE
Address: 12537 MOON ROAD
City-St-Zip: BROOKSVILLE, FL 34613

Title: D ( ) Delete
Name: KLUGEWICZ, DOROTHY
Address: 3291 GRAYTON DR.
City-St-Zip: SPRING HILL, FL 34609

Title: D ( ) Delete
Name: KLUGEWICZ, STAN
Address: 3291 GRAYTON DRIVE
City-St-Zip: BROOKSVILLE, FL 34609

Title: VD ( ) Delete
Name: CANNON, KELLY A
Address: 12537 MOON ROAD
City-St-Zip: BROOKSVILLE, FL 34613

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change ( ) Addition
Name: CANNON, KELLY A
Address: 12537 MOON ROAD
City-St-Zip: BROOKSVILLE, FL 34613

Title: TSD (X) Change ( ) Addition
Name: KAHN, DEBORAH A
Address: 14745 LITTLE LAKE ROAD
City-St-Zip: SPRING HILL, FL 34610

Title: D ( ) Change (X) Addition
Name: KAHN, DONALD N
Address: 14745 LITTLE LAKE ROAD
City-St-Zip: SPRING HILL, FL 34610

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: KELLY A. CANNON VP 04/30/2008

Electronic Signature of Signing Officer or Director — Date