

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N27181

1. Entity Name

LIGHTHOUSE LEARNING CENTER, INC.

FILED
Jun 17, 2002 8:00 am
Secretary of State

05-05-2002 90059 002 ****61.25

490601



DO NOT WRITE IN THIS SPACE

Principal Place of Business 550 KINGSLEY AVENUE ORANGE PARK FL 32073 US		Mailing Address 550 KINGSLEY AVENUE ORANGE PARK FL 32073 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-2901911		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HARVEY, MARY T 550 KINGSLEY AVENUE ORANGE PARK FL 32073		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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.

SIGNATURE: Mary T. Harvey (Harvey) DATE: 4/15/02
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BODENWEBER, CAHTY 293 CROOKEDRIDGE CT ORANGE PARK FL 32065 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD Cynthia Cummings 2661 Foxwood Rd So Orange Park, FL 32073 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD FRICK, ZAN 2245 HOLLY LEAF LANE ORANGE PARK FL 32073 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD JOHNSTON, TRACEY 216 WINDWOOD LANE ORANGE PARK FL 32073 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD Betty Jones 1688 Dolan Rd Dr Green Cove Spr, FL 32043 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD HARVEY, TERRY 2665 EAGLE BAY DR ORANGE PARK FL 32073 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD Eddie Douglas 4729 US Hwy 17 Orange Park, FL 32073 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD Cummings, Cynthia 2661 Foxwood Rd So Orange Park, FL 32073 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD Betty Jones ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Mary T. Harvey DATE: 4/15/02 DAYTIME PHONE: 904-264-2317
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/01)