2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# N27181

Entity Name: CHILDREN'S LIGHTHOUSE FUND, INC.

Current Principal Place of Business:

550 KINGSLEY AVENUE
ORANGE PARK, FL 32073 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 716
ORANGE PARK, FL 320670716 US

New Mailing Address:

FEI Number: 59-2901911 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OWEN, K. DIANTHA
1555 KINGSLEY AVE, STE 504
ORANGE PARK, FL 32073 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: SHIMKO, LAURIE
Address: 1626 SHEFFIEDL PLACE
City-St-Zip: ORANGE PARK, FL 32073

Title: VD ( ) Delete
Name: FOX, JEAN
Address: 1582 STOCKTON DRIVE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: TD ( ) Delete
Name: WOLBERT, PAM
Address: 740 ARRAN COURT
City-St-Zip: ORANGE PARK, FL 32073

Title: SD ( ) Delete
Name: LUBARSKY, JOANNE
Address: 135 VANDERFORD ROAD, NORTH
City-St-Zip: ORANGE PARK, FL 32073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: FOX, JEAN
Address: 1582 STOCKTON DRIVE
City-St-Zip: FLEMING ISLAND, FL 32003

Title: VD (X) Change ( ) Addition
Name: JILL, MOUDY
Address: 1180 SURREY GLEN ROAD
City-St-Zip: MIDDLEBURG, FL 32068

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 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: PAM WOLBERT TREA 04/15/2009

Electronic Signature of Signing Officer or Director — Date