

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
May 08, 2009  
Secretary of State

DOCUMENT# N96000001212

Entity Name: LIGHTHOUSE OF FAITH COMMUNITY CHURCH, INC.

**Current Principal Place of Business:**

755 LOVEJOY ROAD NW  
FORT WALTON BEACH, FL 32548

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 193  
MARY ESTHER, FL 32569

**New Mailing Address:**

FEI Number: 59-3383791      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

WILLIAMS, STANLEY D  
1822 EDGEWOOD DRIVE  
NAVARRE, FL 32566      US

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: DP      ( ) Delete  
Name: WILLIAMS, STANLEY D  
Address: 1822 EDGEWOOD DRIVE  
City-St-Zip: NAVARRE, FL 32566

Title: DV      ( ) Delete  
Name: WILLIAMS, BETHTINA Q  
Address: 1822 EDGEWOOD DRIVE  
City-St-Zip: NAVARRE, FL 32566

Title: DS      ( ) Delete  
Name: PEARCE, MICHAEL W  
Address: 110 DAVID STREET APT. A  
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: DT      ( ) Delete  
Name: WILLIAMS, VICKI L  
Address: 2112 CASTELAR  
City-St-Zip: NAVARRE, FL 32566

Title: ADS      (X) Delete  
Name: WILLIAMS, VICKI L  
Address: 2112 CASTELAR  
City-St-Zip: NAVARRE, FL 32566

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: DS      (X) Change ( ) Addition  
Name: WILLIAMS, VICKIE L  
Address: 2112 CASTELAR  
City-St-Zip: NAVARRE, FL 32566

Title: DT      (X) Change ( ) Addition  
Name: NIKKI, GODBOLT N  
Address: 5 SANDLEWOOD DRIVE APT. 7C  
City-St-Zip: FORT WALTON BEACH, FL 32548

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: BETHTINA Q WILLIAMS

DV

05/08/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date