2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9600001212

1. Entity Name

LIGHTHOUSE OF FAITH COMMUNITY CHURCH, INC.



FILED Feb 17, 2003 8:00 am Secretary of State
02-17-2003 90240 033 ****61.25

Principal Place of Business 755 LOVEJOY ROAD NW FORT WALTON BEACH FL 32548		Mailing Address P.O. BOX 193 MARY ESTHER FL 32569			1 12011101 040 101	IR RINTI FORM BOMI BOMI BOMI BO	101 11010 1100 1 11	1816 (181) H.C.	
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Number 59	-3383791		pplied For ot Applicable	
Zip	Country	Zip	Coi	untry	5. Certificate of Sta	atus Desired	\$8.75 Ad	Iditional	
6. Name and Address of Current Registered Agent					7. Name and Adda	ess of New Registered			
(Name					
WILLIAMS	S, STANLEY D			-05	75-400 D 11 1 1 1 1				
	GETT PLACE			- Street-Addre	ess (P.O. Box Number is N	ot Acceptable)			
FORT WALTON BEACH FL 32548									
				City		FL	Zip Cod	de	
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	Signature, typed or printed name of registered agent as	nd title if applicable. (NOT)	E: Registere	d Agent signature rec	quired when reinstating)	DATE			
FILE NOW: FEE IS \$61.25 9. Election Camp Trust Fund Co				· -	\$5.00 May Be Added to Fees	Make Checi Florida Depar			
10.	OFFICERS AND DIR	ECTORS	11.		ADDITIONS/CHANGE	S TO OFFICERS AND DII	RECTORS IN	V 10	
TITLE	DP Delete		TITLE		· · · · · · · · · · · · · · · · · · ·	· • • • • • • • • • • • • • • • • • • •	☐ Change	Addition	
NAME	WILLIAMS, STANLEY D		NAM	E					
STREET ADDRESS	184 BAGGETT PLACE		STRE	ET ADDRESS				(i	
CITY-ST-ZIP	FORT WALTON BEACH FL 32548		CITY	-ST-ZIP				13	
TITLE	DV	☐ Delete	TITLE	: -	, .	, ,	☐ Change	Addition	
NAME	WILLIAMS, BETHTINA Q		NAM	Ε					
STREET ADDRESS	184 BAGGETT PLACE		STRE	ET ADDRESS				ļ	
CITY-ST-ZIP	FORT WALTON BEACH FL 32548		CITY	-ST-ZIP					
TITLE	S	☐ Delete	TITLE	: -			☐ Change	Addition	
NAME	WILLIAMS, DAVID F		NAM						
STREET ADDRESS	19 MCMILLAN:ST:	- Land -	STRE	ET ADDRESS	والمعار يتهيونهن ويوالو والتنسيات	material of the control			
CITY-ST-ZIP	HURLBURT FIELD FL 32544		CITY	-ST-ZIP					
TITLE	T	☐ Delete	TITLE				☐ Change	☐ Addition	
NAME	HENSON, WANDA F		NAM	:					
STREET ADDRESS	755 LOVEJOY ROAD NW		STRE	ET ADDRESS				{	
CITY-ST-ZIP	FT. WALTON BEACH FL 32548		CITY	·ST-ZIP					
TITLE		☐ Delete	TITLE				☐ Change	Addition	
NAME			NAMI						
STREET ADDRESS			STRE	ET ADDRESS					
CITY-ST-ZIP			CITY	-ST-ZIP					
TITLE		☐ Delete	TITLE				☐ Change	☐ Addition	
NAME		L Delete	NAME	I				☐ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP				ST-ZIP					
12. I hereby a	vertify that the information supplied with t	hie filing dose not qualify for	the ever	notion stated in	Section 110 07(2)(3) Fin-	ida Statutaa I furthay aad	ili alama alam il		

indicated on this report or supplied with this finding does not quality 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 receive por 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:

FEB 1 2 2003

856-244-2003