

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

FILED
Feb 26, 2003 8:00 am
Secretary of State

02-26-2003 90180 023 ****61.25

DOCUMENT # N98000006997

1. Entity Name

LIGHT FOR THE NATIONS CHURCH, INC.



Principal Place of Business

5233 US HWY 98 N
#190
LAKELAND FL 33809
US

Mailing Address

PO BOX 428
KATHLEEN FL 33849
US

2. Principal Place of Business

5078 WILLIAMSTOWN BLVD

3. Mailing Address

P.O. Box 428

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LAKELAND

City & State

KATHLEEN

Zip

FL 33810

Country

Zip

FL 33849

Country

4. FEI Number 59-3559537

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

ARGUELLES, EDWARD
5233 US HWY 98 N
LAKELAND FL 33809

7. Name and Address of New Registered Agent

Name ARGUELLES, EDUARDO

Street Address (P.O. Box Number is Not Acceptable)

5078 WILLIAMSTOWN BLVD.

City LAKELAND

FL

Zip Code 33810

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 and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
D	ARGUELLES, EDUARDO	11705 OLD DADE CITY RD	KATHLEEN LF 33849	<input checked="" type="checkbox"/>
D	ARGUELLES, LUCAS G	11705 OLD DADE CITY RD	KATHLEEN FL 33849	<input checked="" type="checkbox"/>
D	DE ARGUELLES, ANNA R	11705 OLD DADE CITY ROAD	KATHLEEN FL 33849	<input checked="" type="checkbox"/>
D	ORTIZ, WILFREDO	P O BOX 292066 N/A	TAMPA FL 33647	<input checked="" type="checkbox"/>
D	ARGUELLES, CARLA B	PO BOX 428	KATHLEEN FL 33849	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
P	ARGUELLES EDUARDO	5078 WILLIAMSTOWN BLVD.	LAKELAND - FL 33810	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V	ARGUELLES ANNA RACH	5078 WILLIAMSTOWN BLVD.	LAKELAND - FL 33810	<input checked="" type="checkbox"/>	<input type="checkbox"/>
S	ARGUELLES LUCAS G.	11705 OLD DADE CITY RD.	KATHLEEN - FL 33849	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	ORTIZ, WILFREDO J.	P.O. BOX 292066 N/A	TAMPA - FL 33647	<input checked="" type="checkbox"/>	<input type="checkbox"/>
T	ORTIZ CARLA B.	P.O. BOX 292066 N/A	TAMPA - FL 33647	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	SOLIS SARA	P.O. BOX 428	KATHLEEN - FL 33849	<input type="checkbox"/>	<input checked="" type="checkbox"/>

CR2E037 (10/02)

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: SIGNATURE FREQUENTADO ARGUELLES 02/16/03 863-859-9529