

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 24, 2006 8:00 am**  
**Secretary of State**

03-24-2006 90027 020 \*\*\*150.00



**DOCUMENT # P01000012888**  
 1. Entity Name  
**LIGHTHOUSE PROMOTIONS, INC.**

Principal Place of Business      Mailing Address  
**11125 CLAYRIDGE DR**      **11125 CLAYRIDGE DR**  
**TAMPA FL 33635**      **TAMPA FL 33635**



03152006    No Chg-P    CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
**59-3698038**      Not Applicable

5. Certificate of Status Desired        **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**KEAGY, ROGER D**  
**11125 CLAYRIDGE DR.**  
**TAMPA, FL 33635**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	PSTV
NAME	KEAGY, ROGER D
STREET ADDRESS	11125 CLAYRIDGE DR.
CITY-ST-ZIP	TAMPA, FL 33635
TITLE	D
NAME	KEAGY, ROGER D
STREET ADDRESS	11125 CLAYRIDGE DR.
CITY-ST-ZIP	TAMPA, FL 33635
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, 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:** *Roger D Keagy*      3/15/06      Date      Daytime Phone #