

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 3:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000054531 (6)

1. Corporation Name

LIGHTHOUSE REAL ESTATE HOLDINGS, INC.

Principal Place of Business

50 N. LAURA ST.
~~JACKSONVILLE~~ MC 099-000-1812
JACKSONVILLE FL 32202

Mailing Address

50 N. LAURA ST.
~~JACKSONVILLE~~ MC 099-000-1812
JACKSONVILLE FL 32202

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/20/1994

3a. Date of Last Report

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

59-3262733

Applied For

Not Applicable

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23

City & State

28

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

Zip

Country

24

25

Zip

Country

29

30

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No on consolidated

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent **basia**

HEAD, JAMES A

50 N. LAURA ST.

~~JACKSONVILLE~~ MC 099-000-1812

JACKSONVILLE FL 32202

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	HEAD, JAMES A
STREET ADDRESS	50 N. LAURA ST., 0TH FLOOR
CITY - ST - ZIP	JACKSONVILLE FL 32202
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	D/S/T/V	☒ Change ☐ Addition
2. NAME		
3. STREET ADDRESS	50 N. LAURA ST. MC 099-000-1812	
4. CITY - ST - ZIP		
2. TITLE	P/D	☐ Change ☒ Addition
2. NAME	MILLER, ROBERT F., JR.	
3. STREET ADDRESS	50 N. LAURA ST MC 099-000-1830	
4. CITY - ST - ZIP	JACKSONVILLE, FL 32202	
3. TITLE	D/AS/V	☐ Change ☒ Addition
3. NAME	JARBOE, LLOYD ALLEN, JR.	
3. STREET ADDRESS	50 N. LAURA ST MC 099-000-1830	
4. CITY - ST - ZIP	JACKSONVILLE, FL 32202	
4. TITLE	V	☐ Change ☒ Addition
4. NAME	KRAMER, WILLIAM G.	
4. STREET ADDRESS	1000 CENTURY PARK DRIVE 4th Floor	
4. CITY - ST - ZIP	TAMPA, FL 33607	
5. TITLE	V	☐ Change ☒ Addition
5. NAME	AKINS, ROY R.	
5. STREET ADDRESS	1000 CENTURY PARK DRIVE, 4th Floor	
5. CITY - ST - ZIP	TAMPA, FL 33607	
6. TITLE		☐ Change ☐ Addition
6. NAME		
6. STREET ADDRESS		
6. CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James A. Head (904) 791-5275

Director, Secretary, Treasurer and Vice President

4/5/95