

FILE NOW: FILING FEE AFTER MAY 1 IS \$550

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**Apr 24 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # **S07556 (1)**
1. Corporation Name
LIGHTHOUSE REALTY OF ST. GEORGE ISLAND, INC.



Principal Place of Business: **BOX 126 (WEST GULF BEACH DR.) ST. GEORGE ISLAND FL 32328**

Mailing Address: **BOX 126 (WEST GULF BEACH DR.) ST. GEORGE ISLAND FL 32328-C**

2. Principal Place of Business: **61 WEST GULF BEACH DRIVE (6) WEST GULF BEACH DR.**

2a. Mailing Address: **61 WEST GULF BEACH DR.**

21. **SUITE C** 26. **SUITE C**

22. **ST. GEORGE ISLAND, FL** 27. **ST. GEORGE ISLAND, FL**

23. **32328** 28. **32328**

24. **FRANKLIN** 29. **FRANKLIN** 30. **FRANKLIN**

3. Date Incorporated or Qualified: **10/22/1990** 3a. Date of Last Report: **05/01/1996**

4. FEI Number: **59-3033797** Applied For: Not Applicable:

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

**MILEY, MARION K.
IBIS WAY
ST. GEORGE'S PLANTATION, ST GEORGE ISLAND
EASTPOINT FL 32328**

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code: **FL**

10. Name and Address of New Registered Agent

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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		1. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILEY, MARION K.	1.2. NAME	
STREET ADDRESS	IBIS WAY, ST GEORGES PLA	1.3. STREET ADDRESS	
CITY- ST- ZIP	ST GEORGE ISLAND FL	1.4. CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2. NAME	
STREET ADDRESS		2.3. STREET ADDRESS	
CITY- ST- ZIP		2.4. CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2. NAME	
STREET ADDRESS		3.3. STREET ADDRESS	
CITY- ST- ZIP		3.4. CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2. NAME	
STREET ADDRESS		4.3. STREET ADDRESS	
CITY- ST- ZIP		4.4. CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2. NAME	
STREET ADDRESS		5.3. STREET ADDRESS	
CITY- ST- ZIP		5.4. CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2. NAME	
STREET ADDRESS		6.3. STREET ADDRESS	
CITY- ST- ZIP		6.4. CITY- ST- ZIP	

14. I do 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 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: *Marion K. Miley* DATE: *April 18, 1997*

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **MARION K. MILEY**

Daytime Phone #: **(904) 927-2821**

CR2E034 (9/96)