## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## POCUMENT # P96000040739 (0)

THE LIGHTHOUSE CONNECTION, INC.

Principal Place of Business Mailing Address						1 10011001 110 10110 01111 EDEEL PRINT 8011	BOALL BLOKE BOLLE I		
740 NORTH MAGNOLIA AVENUE 740 NORTH MAGNOLIA AV ORLANDO FL 32803 ORLANDO FL 32803-3809									
•						3. Date Incorporated or Qualified 05/13/1996	3a. Date of	Last Re	eport
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	<u></u>	Aρ	plied For
21		26				59 <b>-</b> 3377508		No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		,,,,,		5. Certificate of Status Desired	1 1 .	3.75 A Fee Re	dditional quired
City & State	е	City & State				6. Election Campaign Financing	\$	5.00	May Be
23		28	····			Trust Fund Contribution		Added t	
Zip	Country	Zφ	Cიս	ntry		8. This corporation has liability for in			199.032
24	25		30				Yes No		
	9. Name and Address of Curr	ent Registered Agent		81 Name		10. Name and Address of New Re	Jistereo Agen		
	RILAWYER CHARTERED					RK A. YINGLING			
_343 ALMERIA AVENUE				82 Street A	Address	ress (P.O. Box Number is Not Acceptable) 740 Magnolia Avenue No:			
CUF	<del>VAL GABLES FL-33134</del>			83		Tagnoria Aveno	C MOT 0	71	
								,	
				<b>84</b> City	Or	lando	FL 85	Zip	ode 803
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508. Florida Statute	s the al	ove-named	COMPOR	ation submits this statement for the p			
office or r	registered agent, or both, in the St	n: of Florida. Such change was a	uthorize	by the corp	ooration	ation submits this statement for the p i's board of directors. I hereby accer	t the appointm	iont as	registered
		gations of, Section 607.0305, Floi							
SIGNATURE,	Stanature, typed or printed some of represented a	agon and title if applicable. (NOTE		Agont signature			il 25,	! )	2.1
12.		NO DIRECTORS	13.	·		ADDITIONS/CHANGES TO OFFIC	ERS AND DIR	ECTOR	S IN 12
TITLE	PD	DELETE	1.1 10	LE				hange	Addition
NAME	YINGLING, MARK A		1.2 N/	ME					
STREET ADDRESS	740 NORTH MAGNOLIA AVE	NUE	1.3 \$1	REET ADDRESS					
CITY-ST-ZIP	ORLANDO FL 32803		1.4 CI	Y-ST-ZIP					
TITLE	<del>VTD</del> -	🔀 DELETE	2.1 11	LE	D		<b>X</b> (	hange	Addition
NAME	CARDEN, DONALD E		2.2 N	Mf		niel Mault			
STREET ADDRESS	-740 NORTH MAGNOLIA-AVE	<del>NUE</del>	2351	REE1 ADDRESS	74	O North Magnolia	Avenu	е	
CITY-ST-ZIP	-ORLANDO FL 32803		240	1Y-S7-ZIP	0r	lando, FL 32803			
TITLE	<del>V6D</del> -	<b>≥</b> DELFTE	3170	IE '	ļ			Change	L Addition
NAME	BURNS, GERALD		3.2 N/						
STREET ADDRESS	740 NORTH MACNOLIA AVE	<del>NUE</del>		REE1 ADDRESS					
CITY-ST-ZIP	-ORLANDO FL-32803	Decen		TY-S1-ZIP	ļ		<del></del>	hono-	T   Katabia -
TITLE		DELETE	4.1 1					Change	L_J Addition
NAME OTRECT ADDRESS			4.2 N						
STREET ADDRESS				REET ADDRESS					
CITY-ST-ZIP TITLE		DELETE	4.4 CI 5.1 TI	IY-ST-7IP			Πí	Change	Addition
NAME			5.2 N/				(	ionigo	- Liverities
STREET ADDRESS				REET ADDRESS	ļ				
CITY-ST-ZIP				TY-ST-ZIP	ĺ				
TITLE		DELETE	61TI					Change	Addition
NAME			6.2 N/						
STREET ADDRESS				reet address	<u> </u>				
CITY-ST-ZIP				IY-SI-ZIP				,	
14. Ldo here	by certify that the information supp	lied with this filing does not qualify	for the	exemption s	lated in	Section 119.07(3)(i), Florida Statute	s. I further cert	ify that	the
lamano	on indicated on this annual report o ifficer or director of the corporation in Block 12 or Block 13 if changed,	or the receiver or trustee empower	ered to e	ccurate and xecute this r	that m report a	y signature shall have the same lega s required by Chapter 607, Florida S	i effect as if mi tatutes; and th	ade und at my n	der oath; that ame

IGNATURE MED SA CALLY DIN BY CHILL WARK A VINGLING) 4/25/97 407-423-837