

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 730668

**FILED**  
**Feb 02, 2016**  
**Secretary of State**  
**CC0813870487**

**Entity Name:** LIGHTHOUSE OF BROWARD COUNTY, INC.

**Current Principal Place of Business:**

650 NORTH ANDREWS AVENUE  
FT. LAUDERDALE, FL 33311

**Current Mailing Address:**

650 NORTH ANDREWS AVENUE  
FT. LAUDERDALE, FL 33311

**FEI Number: 59-1650909**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

DU PRE, ELLY  
650 N ANDREWS AVENUE  
FT LAUDERDALE, FL 33311 US

*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.*

**SIGNATURE: ELLY DU PRE**

**02/02/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title ED  
Name DU PRE, ELLY DR.  
Address 650 N ANDREWS AVE  
City-State-Zip: FT LAUDERDALE FL 33311

Title PRES  
Name SWEET, SHANE  
Address 650 NORTH ANDREWS AVENUE  
City-State-Zip: FT. LAUDERDALE FL 33311

Title VP  
Name TROTTMAN, DAN  
Address 650 NORTH ANDREWS AVENUE  
City-State-Zip: FT. LAUDERDALE FL 33311

Title T  
Name GUTIERREZ, LAZARO  
Address 650 NORTH ANDREWS AVENUE  
City-State-Zip: FT. LAUDERDALE FL 33311

Title SECRETARY  
Name LEWIS, JONATHAN B  
Address 650 NORTH ANDREWS AVENUE  
City-State-Zip: FT. LAUDERDALE FL 33311

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: ELLY DU PRE**

**EXECUTIVE DIRECTOR**

**02/02/2016**

Electronic Signature of Signing Officer/Director Detail

Date