

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005316

Entity Name: LIGHTHOUSE HOMESCHOOLERS, INC.

Current Principal Place of Business:

5021 SHELLEY CT
LAKELAND, FL 33805

Current Mailing Address:

P.O. BOX 631
HIGHLAND CITY, FL 33846

FEI Number: 01-0736930

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JONES, JODI
5021 SHELLEY CT
LAKELAND, FL 33805 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: JODI JONES

01/14/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name SHARRETT, KRISTINA
Address 331 EASTON DR
City-State-Zip: LAKELAND FL 33803

Title P
Name LUTTERMOSER, SHELLY
Address 1340 MOORES LANE
City-State-Zip: MULBERRY FL 33860

Title S
Name PAPE, SAMANTHA
Address 2075 HIGH VISTA DR
City-State-Zip: LAKELAND FL 33813

Title T
Name JONES, JODI L
Address 5021 SHELLEY CT
City-State-Zip: LAKELAND FL 33805

Title D
Name SARAH, WALTON
Address 3531 MANOR LOOP
City-State-Zip: LAKELAND FL 33810

Title DIRECTOR
Name SMITH, KIMBERLY
Address 4761 HIGHLAND PLACE CR
City-State-Zip: LAKELAND FL 33813

Title D
Name POURROY, CHRISTINA
Address 215 VICTOR RD
City-State-Zip: LAKELAND FL 33809

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: JODI JONES

TREASURER

01/14/2015

Electronic Signature of Signing Officer/Director Detail

Date