

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000002596

**FILED**  
**Apr 30, 2015**  
**Secretary of State**  
**CC8920529846**

**Entity Name:** LEARNING TO BE THE LIGHT MINISTRIES, INC.

**Current Principal Place of Business:**

4207 KINGSFIELD DRIVE  
PARRISH, FL 34219

**Current Mailing Address:**

4207 KINGSFIELD DRIVE  
PARRISH, FL 34219

**FEI Number:** 46-5564146

**Certificate of Status Desired:** No

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

JANNETTE, BONNIE J  
4207 KINGSFIELD DRIVE  
PARRISH, FL 34219 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name JANNETTE, BONNIE J  
Address 4207 KINGSFIELD DRIVE  
City-State-Zip: PARRISH FL 34219

Title VP  
Name BRICE, MARTHA  
Address 3615 78TH AVENUE EAST  
City-State-Zip: SARASOTA FL 34243

Title T  
Name JANNETTE, THOMAS  
Address 4207 KINGSFIELD DRIVE  
City-State-Zip: PARRISH FL 34219

Title S  
Name KILGO, HEATHER  
Address 5722 FISHERMAN'S DRIVE  
City-State-Zip: BRADENTON FL 34209

*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:** BONNIE J JANNETTE

**PRESIDENT**

**04/30/2015**

Electronic Signature of Signing Officer/Director Detail

Date