2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008
Secretary of State

DOCUMENT# 347809

Entity Name: LIGHTHOUSE CO-OP APARTMENTS INC

Current Principal Place of Business:

4730/4740 PINE TREE DR
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 415342
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 59-1296537 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THE WALL MGMT., CORP
1440 J.F.KENNEDY CAUSEWAY
429-C
MIAMI BEACH, FL 33141 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: KELLY, SHEILA
Address: 4730 PINE TREE DR., #02
City-St-Zip: MIAMI BEACH, FL 33140

Title: V ( ) Delete
Name: VOGELHUT, REID
Address: 4730 PINE TREE DR, # 15
City-St-Zip: MIAMI BEACH, FL 33140

Title: P ( ) Delete
Name: SHEFFMAN, TAMRA
Address: 4600 ROYAL PALM AVE
City-St-Zip: MIAMI BEACH, FL 33140

Title: T ( ) Delete
Name: SANCHEZ, JORGE
Address: 4740 PINE TREE DR. #24
City-St-Zip: MIAMI BEACH, FL 33140

Title: D ( ) Delete
Name: GARCIA, ROUMARDO
Address: 4740 PINE TREE DR. #18
City-St-Zip: MIAMI BEACH, FL 33140

Title: S ( ) Delete
Name: SACHI, J
Address: 4730 PINE TREE DR 17
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ORLANDO DE LUIZ RA 04/25/2008
Electronic Signature of Signing Officer or Director Date