

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705475

FILED  
Apr 01, 2009  
Secretary of State

Entity Name: LIGHTHOUSE ASSEMBLY OF GOD OF MELBOURNE, INC.

**Current Principal Place of Business:**

26 W FEE AVE  
MELBOURNE, FL 32901

**New Principal Place of Business:**

**Current Mailing Address:**

26 W FEE AVE  
MELBOURNE, FL 32901

**New Mailing Address:**

FEI Number: 59-1992155      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BURNHAM, JOHN L  
3476 FAN PALM BLVD.  
MELBOURNE, FL 32901      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

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: INMAN, PETER J  
Address: 1134 WHITE OAK CIRCLE  
City-St-Zip: MELBOURNE, FL 32934

Title: D      ( ) Delete  
Name: ALFRED, WAVENEY  
Address: 729 BANKS ST. NW  
City-St-Zip: PALM BAY, FL 32907

Title: D      ( ) Delete  
Name: LINGENFELTER, BILLY  
Address: 600 W MANOR PLACE  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: D      ( ) Delete  
Name: BURNHAM, JOHN  
Address: 3476 FAN PALM BLVD.  
City-St-Zip: MELBOURNE, FL 32901

Title: D      ( ) Delete  
Name: NDOMB, THOMAS  
Address: 225 ALCANTARRA ST. NW  
City-St-Zip: PALM BAY, FL 32907

Title: D      ( ) Delete  
Name: JOEL, SPENCE  
Address: 1768 APACHE ST. NE  
City-St-Zip: PALM BAY, FL 32907

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D      (X) Change ( ) Addition  
Name: MASSEY, CHRISTOPHER S  
Address: 590 TEAKWOOD AVENUE  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D      (X) Change ( ) Addition  
Name: LINGENFELTER, BILLY  
Address: 600 MANOR PLACE  
City-St-Zip: WEST MELBOURNE, FL 32904

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER J. INMAN

P

04/01/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date