2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708398

FILED Mar 06, 2009 Secretary of State

Entity Name: LIGHTHOUSE CENTER FOR THE ARTS, INC.							
Current Principal Place of Business:				New Principal Place of Business:			
	ESTA DRIVE A, FL 33469						
Current Mailing Address:				New Mailing Address:			
	ESTA DRIVE A, FL 33469						
FEI Number:	59-1118672	FEI Number Applied For ()	FEI Numbe	er Not Applic	able ()	Certific	ate of Status Desired (X)
Name and	Address of C	urrent Registered Agent:	N	ame and A	Address of	New Reg	gistered Agent:
DAVIS, SOI 373 TEQUE TEQUESTA		US	3	AVIS, SON 73 TEQUE EQUESTA		US	
The above in the State		ubmits this statement for the pu	rpose of c	hanging its	registered	office or	registered agent, or both,
SIGNATUR	E:				(03/06/2009	
	Electroni	c Signature of Registered Agen	it				Date
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	T () STROTHER, KA' 9171 SE LOCRE HOBE SOUND, F	EEK CT.	Na Ad	tle: ame: ddress: ity-St-Zip:	() Change	() Addition
Title: Name: Address: City-St-Zip:	S () BARDIN, SUSAN 90 FAIRVIEW EA TEQUESTA, FL	AST	Na Ad	tle: ame: ddress: ity-St-Zip:	() Change	() Addition
Title: Name: Address: City-St-Zip:	VP () MEYER, COLET 235 RIVER DR. TEQUESTA, FL		Na Ad	ame: ddress:	P (MEYER, COL 235 RIVER D TEQUESTA, F	ETTE R.	() Addition
Title: Name: Address: City-St-Zip:	D () DAVIS, SONYA 273 TEQUESTA JUPITER, FL 33		Na Ad	tle: ame: ddress: ity-St-Zip:	() Change	() Addition
Title: Name: Address: City-St-Zip:	P () SPENCER, SUS. 11188 TURTLE I JUPITER, FL 33	BEACH RD.	Na Ad	ame: ddress:	VP (WALSH, JR., 123 TERRAPI JUPITER, FL	MASON N TRAIL	() Addition

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: SONYA DAVIS D 03/06/2009