


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 15, 2007 8:00 am**  
**Secretary of State**


03-15-2007 90029 042 \*\*\*\*70.00

<b>DOCUMENT # 733319</b>	
<b>1. Entity Name</b> THE LIGHTHOUSE FOR CHRIST, INC.	

<b>Principal Place of Business</b> 1247 CENTER ST. HOLLY HILL FL 32117 US	<b>Mailing Address</b> 1247 CENTER AVE HOLLY HILL FL 32117 US
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<b>2. Principal Place of Business - No P.O. Box #</b>	<b>3. Mailing Address</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

<b>City &amp; State</b>	<b>City &amp; State</b>
Zip	Country

<b>4. FEI Number</b> 59-2643004	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b>  <b>\$8.75 Additional Fee Required</b>	

<b>6. Name and Address of Current Registered Agent</b>  FUSSELL, RON R. REV. 1229 POWERS AVE. HOLLY HILL FL 32117
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<b>7. Name and Address of New Registered Agent</b> Name <u>FUSSELL, RON R. REV.</u> Street Address (P.O. Box Number is Not Acceptable) <u>349 PERFECT DRIVE</u> City <u>DAYTONA BEACH</u> , <u>FL</u> Zip Code <u>32124</u>
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<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>
<b>SIGNATURE</b> _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> <b>DATE</b> _____

<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2007</b>	<b>9. Election Campaign Financing Trust Fund Contribution.</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
<b>TITLE</b> PD <b>NAME</b> FUSSEL, REV. R.R. <b>STREET ADDRESS</b> 1229 POWERS AVE. <b>CITY- ST- ZIP</b> HOLLY HILL FL	<input type="checkbox"/> Delete	<b>TITLE</b> PD <b>NAME</b> FUSSELL, REV. R.R. <b>STREET ADDRESS</b> 349 PERFECT DRIVE <b>CITY- ST- ZIP</b> DAYTONA BEACH FL 32124	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> D <b>NAME</b> PITTS, DAVID <b>STREET ADDRESS</b> 11614 TAYLORSVILLE RD <b>CITY- ST- ZIP</b> LOUISVILLE KY 40299	<input type="checkbox"/> Delete	<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY- ST- ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> S <b>NAME</b> RUSSELL, SHARON P <b>STREET ADDRESS</b> 1229 POWERS AVE <b>CITY- ST- ZIP</b> HOLLY HILL FL	<input type="checkbox"/> Delete	<b>TITLE</b> S <b>NAME</b> FUSSELL, SHARON E <b>STREET ADDRESS</b> 349 PERFECT DRIVE <b>CITY- ST- ZIP</b> DAYTONA BEACH FL 32124	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> D <b>NAME</b> BUTLER, LORENZO <b>STREET ADDRESS</b> 31 RUTH DR. <b>CITY- ST- ZIP</b> PALM COAST FL 32164	<input type="checkbox"/> Delete	<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY- ST- ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY- ST- ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY- ST- ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY- ST- ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY- ST- ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:** Rev. Ron Fussell 3-5-2007