2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2009
Secretary of State

DOCUMENT# 735770

Entity Name: PENTECOSTAL LIGHTHOUSE, INC.

Current Principal Place of Business:

2350 W. NEW HAVEN AVE.
W. MELBOURNE, FL 32904

New Principal Place of Business:

Current Mailing Address:

2350 W. NEW HAVEN AVE.
W. MELBOURNE, FL 32904

New Mailing Address:

FEI Number: 59-1730277 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VELIE, BEN P
2350 W NEW HAVEN AVENUE
W. MELBOURNE, FL 32904 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:	D	( ) Delete
Name:	VELIE, RAYMOND	
Address:	2259 ARIZONA ST	
City-St-Zip:	WEST MELBOURNE, FL 32904	
Title:	SD	( ) Delete
Name:	VELIE, JOE B	
Address:	2259 ARIZONA ST	
City-St-Zip:	W MELBOURNE, FL 32904	
Title:	TD	( ) Delete
Name:	RICHARDS, PAUL	
Address:	612 SHERIDAN WOODS DR	
City-St-Zip:	WEST MELBOURNE, FL 32904	
Title:	PD	( ) Delete
Name:	VELIE, BEN P	
Address:	2350 W NEW HAVEN AVE	
City-St-Zip:	WEST MELBOURNE, FL 32904	
Title:	VD	( ) Delete
Name:	CARTER, MARVIN	
Address:	3364 JAY TEE DRIVE	
City-St-Zip:	MELBOURNE, FL	
Title:	D	( ) Delete
Name:	RINALDI, JOSEPH	
Address:	1341 ALTAMONTE AVENUE NE	
City-St-Zip:	PALM BAY, FL 32907	

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

SIGNATURE: PAUL T. RICHARDS TD 02/23/2009

Electronic Signature of Signing Officer or Director — Date