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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 737784

(9)

LIGHTHOUSE MISSIONS, INC.

### Record Husiness	LIGHTHOUSE MISSIONS, INC.						
STUART FI, S4994  2. Pinospal Maca of Business 2. A Mining Alcidense 3. Date incorporated of Outsides 3. Date of composition of Outsides 3. Date of case Report 03/07/1995 4. FE Navibre 3. Sont, Agil, #, etc. 3. Sont, Agil, #, etc. 3. Sont, Agil, #, etc. 3. City & State 3. City	Principal Place of Business		Mailing Address			ELDI OYON BION ONDU ƏNDU OYEM BIONUMDU	
2. Principal Place of Business   22. Maring Address   32. Maring Address   4. FEI Number   59-1779004   Application   55-1779004   State   50-1779004   Application   55-1779004   State   50-1779004   State   50-1779004							
Suite   Suit						· ·	
Sales Apt #, etc.   Sale		ace of Business	<u> </u>			I .	<del>    ''' -    </del>
Cry & State 27 Cry & State 28 Cry & State 29 Cry & State 29 Country 20 Country 30 Country 30 Country 30 Country 30 Country 30 South Precipitation 30 South Preci						59-1779004	
20	22		27			5. Certificate of Status Desired	11 '
28	City & State	•	<b>├</b> ─ '				
CARPENTER, NAOMI 828 S DIXIE HWY STUART FL 33494  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above named corporation submits the statement for the purpose of changing lit registered agent, corporation and the purpose of changing lit registered agent agent for both in the State of Florida Statutes agent agent for both in the State of Florida Statutes agent for both in the State agent for both in the	Zip <b>24</b>	<del>  </del>		<u></u>		This corporation has liability for in Florida Statutes	tangible tax under s. 199.032, Yes No NoN - Pro L. f
CARPENTER, NAOMI 828 S DIXE HWY STUART FL 33494  82 City FL 85 Dix Divis FL 85 Dix		9. Name and Address of Currer	nt Registered Agent				
R28 S DIXIE HWY STUART FL 33494  B3  B4 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florids Statutes, the above named corporation submits the statement for the purpose of changing list registered affice or registered agent, or both, in the State of Florids Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, I am framitive rivers agent, or both, in the State of Florids Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, I am framitive rivers agent, or both, in the State of Florids Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, I am framitive rivers agent age				81	Name		
Part   City   FL   85   Zep Code	828 S DIXIE HWY				Street Addre	ess (P.O. Box Number is Not Acceptable	)
1.1 Pursuant to the provisions of Sections 617 0502 and 617 1502. Findia Statuties, the above harmed corporation submits this statement for the purpose of changing its registered office or registered again, or both, in the State of Florida Such change was unformized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Socton 617 0503, Florida Statutes.  SIGNATURE    Signature figured or print/free office/figured agent at 1807 Agent agent accept the proportion of the obligations of, Socton 617 0503, Florida Statutes.    Signature figured or print/free office/figured agent at 1807 Agent agent accept the appointment as registered agent. I am familiar with, and accept the obligations of, Socton 617 0503, Florida Statutes.    Signature figured or print/free office/figured agent at 1807 Agent agent accept the appointment as registered office or registered office or registered agent. I am familiar accept the appointment as registered agent. I am familiar accept the appointment as registered office or registered agent. I am familiar accept the appointment as registered office or registered or directors. I hereby accept the appointment as registered office or registered or directors. I hereby accept the appointment as registered agent. I am familiar accept the appointment as registered office or directors. I hereby accept the appointment as registered office or directors. I hereby accept the appointment as registered office or directors. I hereby accept the appointment as registered office of the corporation of directors. I hereby accept the appointment as registered office or directors. I hereby accept the appointment as registered office or directors. I hereby accept the appointment as registered office or directors. I hereby accept the appointment as registered office or directors. I hereby accept the appointment accept the appointmen	0.0.1			84	City		85 Zip Code
12.   OFFICERS AND DIRECTORS   13.   ADDITIONS CHANGES TO OFFICERS AND DIRECTORS   13.   ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12	or register	ed agent, or both, in the State of Flori	da. Such change was authori	zed by the corpo	arned corpora ration's board	tion submits this statement for the purp d of directors. I hereby accept the appoi	ose of changing its registered office
12. OFFICERS AND DIRECTORS  13. ADDITIONS C-LANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PSDM CARPENTER, NAOMI 12 NAME SIRET ADDRESS 1340 SANDOLLAR LANE 13 SIRET ADDRESS 1340 SANDOLLAR LANE 13 SIRET ADDRESS 1340 SANDOLLAR LANE 13 SIRET ADDRESS 13 LA C 13 SIRET ADDRESS 13 LA C 13 SIRET ADDRESS 13 LA C 14 CITY-ST-ZP STUART FL 22 NAME 23 SIRET ADDRESS 24 NAME 23 SIRET ADDRESS 24 NAME 23 SIRET ADDRESS 24 NAME 25 NAME 27 NAME 27 NAME 27 NAME 28 S DIXIE HWY 27 STUART FL 27 NAME 28 S DIXIE HWY 28 STD PUNGONE, MIKE 33 SIRET ADDRESS 34 CITY-ST-ZP TITLE DM PUNGONE, MIKE 42 NAME 42 NAME 42 NAME 43 SIRET ADDRESS 124 SE PROCTER LANE 124 SE PROCTER LANE 135 SIRET ADDRESS 1424 SE PROCTER LANE 15 SIRET ADDRESS 16 SIRET ADDRESS 17 ST-ZP 18 STUGER FL  18 SIRET ADDRESS 18 SIRET A	SIGNATURE						
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To me day certify that the information supplied with this straight system and does not quality for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under ceth; 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 12 or Block 13 if changed or on an attachment with an address

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICE OR DIRECTOR

4/16/96 Date 407-286-1290

CR2E037 (12/95)