

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738313

FILED
Apr 20, 2006
Secretary of State

Entity Name: LIGHTHOUSE MINISTRIES, INC.

Current Principal Place of Business:

117 E. MAGNOLIA AVE.
P.O. BOX 3112
LAKELAND, FL 33802

New Principal Place of Business:

215 E. MAGNOLIA AVE.
P.O. BOX 3112
LAKELAND, FL 33802

Current Mailing Address:

117 E. MAGNOLIA AVE.
P.O. BOX 3112
LAKELAND, FL 33802

New Mailing Address:

215 E. MAGNOLIA AVE.
P.O. BOX 3112
LAKELAND, FL 33802

FEI Number: 59-1722768

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURBEVILLE, STEVE
4633 QUEENS POINT DRIVE
LAKELAND, FL 33813 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: VD () Delete
Name: CLARK, BLAIR
Address: 833 CANDICE AVENUE
City-St-Zip: LAKELAND, FL

Title: P () Delete
Name: TURBEVILLE, STEVE
Address: 4633 QUEENS POINT DRIVE
City-St-Zip: LAKELAND, FL 33813

Title: T () Delete
Name: LUNSFORD, KATRINA
Address: 402 S KENTUCKY AVE., #110
City-St-Zip: LAKELAND, FL 33803

Title: S () Delete
Name: BISHOP, DIANNE
Address: 580 GLENDALE ST.
City-St-Zip: LAKELAND, FL 33803

Title: () Delete
Name:
Address:
City-St-Zip:

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: CH () Change (X) Addition
Name: WICKENKAMP, DAVE
Address: 2306 BRANDON ROAD
City-St-Zip: LAKELAND, FL 33803

I hereby certify that the information supplied with this filing does not qualify for the 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: STEVE TURBEVILLE

P

04/20/2006

Electronic Signature of Signing Officer or Director

Date