2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Sep 01, 2005 **DOCUMENT# 738915** Secretary of State

Entity Name: APOSTOLIC LIGHTHOUSE CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

115 NE 3RD STREET

POMPANO BCH, FL 33060 US

Current Mailing Address: New Mailing Address:

33 EAST CAMINO REL #112 BOCA RATON, FL 33432 US

FEI Number: 59-1746241 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JONES, REV CLIFFORD 33 EAST CAMINO REAL #112 BOCA RATON, FL 33432

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

PRES () Delete (X) Change () Addition CRUSE, REBECCA R JONES, CLIFFORD E Name: Name: 33 EAST CAMINO REAL #105 Address: 33 EAST CAMINO REAL #112 Address: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432 City-St-Zip:

Title: SEC () Delete Title: (X) Change () Addition Name: JONES, CLIFFORD E Name: MURPHEY, DEBBIE J Address: 33 EAST CAMINO REAL #105 Address: 10320 TERRA LAGO DRIVE City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: WEST PALM BEACH, FL 33412

Title: **TRES** () Delete Title: **TRES** (X) Change () Addition CRUSE, JESSICA N Name: CRUSE, REBECCA R Name:

33 EAST CAMINO REAL #105 Address: Address: 33 EAST CAMINO REAL #105 City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CLIFFORD E. JONES **PRES** 09/01/2005