2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745323

FILED Apr 26, 2005 Secretary of State

Entity Name: LIGHTHOUSE VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: C/O LIGHTHOUSE ASSETS, INC. 3170 N FEDERAL HWY #100 LIGHTHOUSE POINT, FL 33064 US **Current Mailing Address: New Mailing Address:** C/O LIGHTHOUSE ASSETS, INC. 3170 N FEDERAL HWY #100 LIGHTHOUSE POINT, FL 33064 US FEI Number: 59-2001001 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: SMITH, ROBERT H 3170 N FERDERAL HIGHWAY SUITE 100 LIGHTHOUSE POINT, FL 33064 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DST () Delete (X) Change () Addition VILLARD, NANCY RIEKER, EVELYN Name: Name: 1780 NE 39TH CT. #903 Address: 3951 NE 17TH AVE. Address: City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip: POMPANO BEACH, FL 33064 Title: PD () Delete Title: () Change () Addition STUBBS, JEEVA Name: Name: Address: 3951 NE 17 AVE #708 Address: City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip: Title: DV () Delete Title: (X) Change () Addition BROWN, GAYLE RUSHLOW, JUDITH Name: Name: 1800 NE 40TH CT #203 Address: 1750 NE 39TH CT #806 Address: POMPANO BEACH, FL 33064 City-St-Zip: City-St-Zip: POMPANO BEACH, FL 33064 Title: () Delete Title: DT (X) Change () Addition Name: PROCACCINI, ELIZABETH Name: WADE, WAYNE 1779 NE 40TH PLACE # 401 Address: 1800 NE 40TH CT #206 Address: City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip: POMPANO BEACH, FL 33064 Title: () Delete Title: () Change (X) Addition NICK, TRACY Name: Name: 1779 NE 40TH PL., # 405 Address: Address: City-St-Zip: City-St-Zip: POMPANO BEACH, FL 33064 US

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: JEEVA STUBBS P 04/26/2005