

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Nov 05, 2007
Secretary of State**

DOCUMENT# 747774

Entity Name: LIGHTHOUSE BAPTIST CHURCH OF PANAMA CITY, INC.

Current Principal Place of Business:

3323 EAST 15TH STREET
PANAMA CITY, FL 32405

New Principal Place of Business:

Current Mailing Address:

3323 EAST 15TH STREET
PANAMA CITY, FL 32405

New Mailing Address:

FEI Number: 59-3224466 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MCCAULEY, CAROLL L.
36 OAK AVENUE
PANAMA CITY, FL 32401 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: P () Delete
Name: GLASS, BUDDY E
Address: 3323 E. 15TH ST
City-St-Zip: PANAMA CITY, FL 32405

Title: T () Delete
Name: KING, RODNEY
Address: 6325 TAMMY LANE
City-St-Zip: PANAMA CITY, FL 32404

Title: T () Delete
Name: CHARLES, BOWERS
Address: 3323 E. 15TH ST
City-St-Zip: PANAMA CITY, FL 32405

Title: T () Delete
Name: BAGGETT, HOLLIS
Address: 3323 15TH STREET
City-St-Zip: PANAMA CITY, FL 32405

Title: T (X) Delete
Name: KOPP, DEL
Address: 507 AMY STREET
City-St-Zip: LYNN HAVEN, FL 32444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/AS (X) Change () Addition
Name: ODOM, WILLIAM E SR
Address: 502 EAST PINEFOREST DRIVE
City-St-Zip: LYNN HAVEN, FL 32444

Title: T (X) Change () Addition
Name: KOPP, DEL
Address: 507 AMY STREET
City-St-Zip: LYNN HAVEN, FL 32444

Title: T (X) Change () Addition
Name: BAGGETT, HOLLIS W
Address: 3323 EAST 15TH STREET
City-St-Zip: PANAMA CITY, FL 32405

Title: T (X) Change () Addition
Name: TRIPP, PAUL C
Address: 1719 ILLINOIS AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

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: DEL KOPP

TRES

11/05/2007

Electronic Signature of Signing Officer or Director

Date