NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 747974

LIGHTHOUSE CHURCH AND MINISTRIES, INC.

Principal Place of Business 109 SAN JOSE CIRCLE WINTER PARK FL 32792

Mailing Address

109 SAN JOSE CIRCLE WINTER PARK FL 32792

FILED May 17, 1999 8:00 am Secretary of State

05-17-1999 90005 037 ****61.25



Principal Place of Business 2a. Mailing Address				3. Date Incorporated or Qualifed			
21		26			07/05/1979		
	Suite, Apt. #, etc. Suite, Apt. #				4. FEI Number		olied For
22	27				59-1984648		Applicable
City & State City & State					5. Certifcate of Status Desired	\$8.75 A	
23						Fee Re	<u> </u>
Zip	Country Zip			Country 6. Election Campaign Financing \$5.00 May !			
24			30)		Trust Fund Contribution		o Fees
	9. Name and Address of Curren	t Registered Agent	8	1 Name	10. Name and Address of New Register		
NICOLA ALC SEE				Mailie W	ICOLA A. DE PAD	OVA	
DE PADOVA, NICKALA CORRECTION -				82 Street Address (P.O. Box Number is Not Acceptable)			
DEPADOVA, MICHAEL-A-				109	SANJOSE CIRCLE		
WINTER PARK FL 32792				3			,
			8	4 City	NTER PARK	85 Zip C	
							792
11. Pursuant	to the provisions of Sections 617.050:	2 and 617.1508, Florida St	tatutes, the abo	ve-named com	poration submits this statement for the purpos ion's board of directors. I hereby accept the a	e of changing its population	registerea gistered
office or i	registered agent, or both, in the State of im familiar with, and accept the obligat	tions of, Section 617.0503,	, Florida Statute	s.	ion's board of anothers. Thereby accept and a	PP	•
SIGNATURE							
SIGNATURE	Stgnature, typed or printed name of registered agen	nt and title if applicable. (I	NOTE: Registered Ag	ent signature requir			DC IN 12
12.		ID DIRECTORS	13.	 -	ADDITIONS/CHANGES TO OFFICER	Change	Addition
TITLE	PTSD	☐ DELETE		ì		□ cliarige	
NAME	A-DE PADOVA, NICOLA		1.2 NAME	:			
STREET ADDRESS	109 SAN JOSE CIRCLE		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	WINTER PARK, FL 00000		1.4 CITY-				A .d
TITLE	D	☐ DELETI	E 2.1 TITLE			Change	☐ Addition
NAME	PITCHFORD, DOUGLAS		2.2 NAME				
STREET ADDRESS	109 SAN JOSE CIRCLE		2.3 STRE	ETADDRESS			
CITY-ST-ZIP	WINTER PARK FL		2. 4 CITY	-ST-ZIP			
.TITLE	D	DELETI	E = 3.1 TITLE	:		Change -	Addition
NAME	P-DE PADOVA, NICHQLAS		3.2 NAME	:			
STREET ADDRESS	ALL (BAC OID)		3.3 STRE	ET ADDRESS			
CITY+ST-ZIP	WINTER PARK FL		3.4. CITY	-ST-ZIP			
TITLE		☐ DELET	E 4,1 TITLE			☐ Change	Addition
NAME			4. 2 NAM	E			
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY	ST-ZIP			
TITLE		☐ DELET	E 5.1 TITLE			Change	☐ Addition
NAME	1		5.2 NAMI	•			
STREET ADDRESS	3		5.3 STRE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY	ST-ZIP			
TITLE		☐ DELET	E 6.1 TITLE			☐ Change	Addition
NAME			6.2 NAMI	≣			
STREET ADDRESS			6.3 STRE	ET ADDRESS			
SIREEI AUURESS	"[64 CITY				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.