

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765421

FILED
Mar 24, 2009
Secretary of State

Entity Name: PENTECOSTAL LIGHTHOUSE OF DUNEDIN, INC.

Current Principal Place of Business:

2801 COUNTY RD.#1
DUNEDIN, FL 34698

New Principal Place of Business:

Current Mailing Address:

PO BOX 746
2801 COUNTY RD #1
DUNEDIN, FL 34697

New Mailing Address:

FEI Number: 59-2073833 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HAWKINS, RAYMOND
1534 COASTAL PLACE
DUNEDIN, FL 34698 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: S () Delete
Name: LAUGHLIN-SCOTT, SHIRLEY A
Address: P.O.BOX 183
City-St-Zip: DUNEDIN, FL 34697

Title: PD () Delete
Name: HAWKINS, RAYMOND H
Address: 1534 COASTAL PLACE
City-St-Zip: DUNEDIN, FL 34698

Title: T () Delete
Name: KINNECOM, ROBERT
Address: 997 SANTA MONICA CT
City-St-Zip: DUNEDIN, FL 34698

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: T () Change (X) Addition
Name: SCOTT, FORREST
Address: 771 WEATHERSFIELD DRIVE
City-St-Zip: DUNEDIN, FL 34698

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: SHIRLEY LAUGHLIN-SCOTT

S

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date