

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H14641

FILED
Jul 01, 2004
Secretary of State

Entity Name: LIGHTHOUSE UTILITIES COMPANY

Current Principal Place of Business:

2010 HIGHWAY C-30
PORT ST. JOE, FL 32456 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 428
PORT ST. JOE, FL 32456 US

New Mailing Address:

FEI Number: 59-2453703 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RISH, WILLIAM J.
303 4TH ST.
PORT ST. JOE, FL 32456

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RISH, CAROL T
Address: 2002 CONSTITUTION DRIVE
City-St-Zip: PORT SAINT JOE, FL 32456

Title: D () Delete
Name: BODE, CATHY
Address: 4475 PINEHOLLOW CT
City-St-Zip: ALPHARETTA, GA 30202

Title: D () Delete
Name: RISH JR WILLIAM J,
Address: 2010 MONUMENT AVE
City-St-Zip: PORT ST JOE, FL 32456

Title: VD () Delete
Name: FLOWERS, LANGDON S III
Address: 806 N DAWSON
City-St-Zip: THOMASVILLE, GA

Title: D () Delete
Name: THOMPSON, ELIZABETH,
Address: ROUTE 3, BOX 167
City-St-Zip: PORT ST. JOE, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: RISH, WILLIAM J S/T/D
Address: 2002 CONSTITUTION DRIVE
City-St-Zip: PORT ST JOE, FL 32456

Title: P/D (X) Change () Addition
Name: RISH, WILLIAM J JR
Address: 2010 HWY C-30
City-St-Zip: PORT ST JOE, FL 32456

Title: VP/D (X) Change () Addition
Name: FLOWERS, LANGDON S III
Address: 1135 GORDON AVENUE
City-St-Zip: THOMASVILLE, GA 31792

Title: D (X) Change () Addition
Name: CLIFTON, MARGARET F
Address: 229 HAND AVENUE
City-St-Zip: PELHAM, GA 31779

Title: D () Change (X) Addition
Name: FLOWERS, LANGDON S JR
Address: P.O. BOX 997
City-St-Zip: THOMASVILLE, GA 31799

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM J RISH JR

P/D

07/01/2004

Electronic Signature of Signing Officer or Director

_____ Date