

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H14641

FILED  
Mar 30, 2005  
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 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

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: RISH, WILLIAM J S/T/D  
Address: 2002 CONSTITUTION DRIVE  
City-St-Zip: PORT ST JOE, FL 32456

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

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition  
Name: RISH, WILLIAM J P,D  
Address: P.O. BOX 39  
City-St-Zip: PORT ST JOE, FL 32457

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

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

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

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

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

D

03/30/2005

Electronic Signature of Signing Officer or Director

Date