2006 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Mar 02, 2006 08:00 Al DOCUMENT # H86350 **Secretary of State** LIGHTHOUSE REALTY AND INVESTMENT CORP. Principal Place of Business Mailing Address C/O KENNETH J PARRISH C/O KENNETH J PARRISH 4411 BEACON CIRCLE STE 4 4411 BEACON CIRCLE STE 4 WEST PALM BEACH, FL 33407 WEST PALM BEACH, FL 33407 US 01262006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2613946 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PARRISH, KENNETH J DO NOT WRITE 201 FERNAN DINA ST FORT PIERCE, FL 34949 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature typed of orioted game of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10, OFFICERS AND DIRECTORS HTIF DVS NAME PARRISH, J. KENNETH, JR. STREET ADDRESS 4411 BEACON CIR STE 4 WEST PALM BEACH, FL 33407 CITY-ST-ZIP U00000453891 H3/14/06-80040-012 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TILLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-78P TITLE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 epocomered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with ag address, with all other like empowered.

NAME STREET ADDRESS CITY-ST-ZIP

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