

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 24, 2003 8:00 am**  
**Secretary of State**

04-24-2003 90126 017 \*\*\*\*70.00

**DOCUMENT # N01000000660**

1. Entity Name  
**CALVARY LIGHTHOUSE BY THE SEA, INC.**



Principal Place of Business  
**PO BOX 51  
PALM BEACH FL 33480**

Mailing Address  
**PO BOX 51  
PALM BEACH FL 33480**

11011004



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **NOT APPLICABLE**

Applied For  
☒ Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CARMONA, MIGUEL  
258 SEMINOLE AVE APT 2  
PALM BEACH FL 33480**

Name  
**MIGUEL CARMONA**

Street Address (P.O. Box Number is Not Acceptable)  
**251 BRADLEY PLACE APT. 6**

City  
**PALM BEACH**

FL

Zip Code  
**33480**

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 or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**MIGUEL J. CARMONA**

**4/21/03**

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete  
NAME **AD**  
STREET ADDRESS **CARMONA, SONIA**  
CITY-ST-ZIP **258 SEMINOLE AVE APT 2  
PALM BEACH FL 33480**

TITLE ☐ Change ☐ Addition  
NAME **AD**  
STREET ADDRESS **CARMONA, SONIA**  
CITY-ST-ZIP **251 BRADLEY PLACE APT. 6  
PALM BEACH, FL. 33480**

TITLE ☐ Delete  
NAME **T**  
STREET ADDRESS **PAOLANTONIO, RACHAEL**  
CITY-ST-ZIP **950 S KANNER HWY  
STUART FL 34994**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **T**  
STREET ADDRESS **CARMONA, MICHAEL A**  
CITY-ST-ZIP **240 PARK AVE APT 303  
PALM BEACH FL 33480**

TITLE ☐ Change ☐ Addition  
NAME **T**  
STREET ADDRESS **CARMONA, MICHAEL A**  
CITY-ST-ZIP **251 BRADLEY PLACE APT. 6  
PALM BEACH, FL. 33480**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
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CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 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 empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: **MIGUEL J. CARMONA**

**4/21/03 (361) 714-1888**

CR2E037 (10/02)