2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N01000004804

1. Entity Name

LIGHTHOUSE CHURCH OF GOD OF VERO BEACH, INC.



FILED Jan 10, 2007 08:00 AM Secretary of State

Principal Place of Business

1190 27TH AVENUE VERO BCH, FL 32960 Mailing Address

557 24TH AVENUE VERO BEACH, FL 32962



01072007 No Chg-NP

CR2E037 (4/06)

4.	FEI Number	
	59-3731483	
	00 0.0.100	

Applied For Not Applicable

5. Certificate of Status Desired

K

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PIERSON, JOHN A REV. 557 24TH AVENUE VERO BEACH, FL 32962

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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. 1 am familiar with, and accept the obligations of registered agent.							
SIGNATURE_	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Registered /	\gent signature	required when reinstating)	DATE		
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Financ Trust Fund Contribution.	ing	\$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PIERSON, JOHN A REV. 557 24TH AVE VERO BCH, FL 32962				y00000581486 01/10/07-80090-010 70.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PIERSON, LESLIE W 557 24TH AVE VERO BCH, FL 32962						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALL, CONNIE J 3236 1ST ROAD VERO BCH, FL 32968			DO	NOT WRITE		
NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-SI-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
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							

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 certify, 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

ON SOLM A. FLORAS

Rev. John A. Pierson

1-8-07 (772)770-0