

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2008 8:00 am
Secretary of State

02-06-2008 90086 001 ****61.25
02-06-2008 90086 002 *****8.75

DOCUMENT # N01000004804					
1. Entity Name LIGHTHOUSE CHURCH OF GOD OF VERO BEACH, INC.					
Principal Place of Business 1190 27TH AVENUE VERO BCH, FL 32960			Mailing Address 557 24TH AVENUE VERO BEACH, FL 32962		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 529 24th Avenue			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Vero Beach, FL		4. FEI Number 59-3731483	
Zip		Country 32962 Indian River		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PIERSON, JOHN A REV. 557 24TH AVENUE VERO BEACH, FL 32962			7. Name and Address of New Registered Agent		
Name			Street Address (P.O. Box Number is Not Acceptable)		
City			FL Zip Code		
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 <u>Rev. John A. Pierson</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		<u>Rev. John A. Pierson</u> <small>(NOTE: Registered Agent signature required when reissuing)</small>		<u>2-4-08</u> <small>DATE</small>	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete PIERSON, JOHN A REV. 557 24TH AVE VERO BCH, FL 32962		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 529 24th Avenue	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete PIERSON, LESLIE W 557 24TH AVE VERO BCH, FL 32962		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 529 24th Avenue	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete HALL, CONNIE J 3236 1ST ROAD VERO BCH, FL 32968		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 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: <u>Rev. John A. Pierson</u> <u>Rev. John A. Pierson</u> <u>2-4-08</u> <u>(772) 770-6442</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					