

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2004 8:00 am
Secretary of State

03-05-2004 90021 010 ****70.00

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1. Entity Name
PENTECOSTAL LIGHTHOUSE FELLOWSHIP, INC.



Principal Place of Business
**1236 LEEA DR
JACKSONVILLE, FL 32254**

Mailing Address
**1236 LEEA DR
JACKSONVILLE, FL 32254**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02262004 Chg-NP

CR2E037 (10/03)

4. FEI Number
04-3589753

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SPRATLIN, JOHN P SR
1236 LEEA DR.
JACKSONVILLE, FL 32254**

7. Name and Address of New Registered Agent

Name
Spratlin, John P. Sr.
Street Address (P.O. Box Number is Not Acceptable)
5827 NW 216th Street
City
Lawtey FL Zip Code
32058

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: *Rev. John P. Spratlin Sr.*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
STIEFEL, HUGHIE
1236 LEEA DR
JACKSONVILLE, FL 32254 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SPRATLIN, JOHN P SR
1236 LEEA DR
JACKSONVILLE, FL 32254 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SPRATLIN, WILBUR W
1236 LEEA DR
JACKSONVILLE, FL 32254 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
STIEFEL, HUGHIE
476 TOWERING PINES DR.
JACKSONVILLE, FL 32220 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D Stiefel, Hughie
5827 NW 216th St.
Lawtey, FL 32058 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D Spratlin, John P. Sr.
5827 NW 216th St.
Lawtey, FL 32058 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D Spratlin, Wilbur W.
5827 NW 216th St.
Lawtey, FL 32058 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D Stiefel, Hughie
5827 NW 216th St.
Lawtey, FL 32058 ☒ Change ☐ Addition

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

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

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: *Rev. John P. Spratlin Sr.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #