

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008192

FILED
May 15, 2008
Secretary of State

Entity Name: BEACON LIGHT MINISTRIES, INC.

Current Principal Place of Business:

1195 S.E. KIRK STREET
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

1195 S.E. KIRK STREET
STUART, FL 34997

New Mailing Address:

FEI Number: 65-1158805 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CURINGTON, NORM W VPD
BEACON LIGHT MINISTRIES INC.
1195 S.E. KIRK STREET
STUART, FL 34997 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MAY, DAVID
Address: 725 NORTH HIGHWAY A1A, SUITE C201
City-St-Zip: JUPITER, FL 33477

Title: VD () Delete
Name: CURINGTON, NORM
Address: 725 NORTH HIGHWAY A1A, SUITE C201
City-St-Zip: JUPITER, FL 33477

Title: STD () Delete
Name: WOODSIDE, JACYNTH
Address: 725 NORTH HIGHWAY A1A, SUITE C201
City-St-Zip: JUPITER, FL 33477

Title: VD () Delete
Name: WOODSIDE, JACYNTH
Address: 725 NORTH HIGHT A1A, SUITE C201
City-St-Zip: JUPITER, FL 33477

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NORM CURINGTON

VD

05/15/2008

Electronic Signature of Signing Officer or Director

Date