

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005316

FILED
Jan 16, 2012
Secretary of State

Entity Name: LIGHTHOUSE HOMESCHOOLERS, INC.

Current Principal Place of Business:

817 BUTTERCUP DRIVE
LAKELAND, FL 33801

New Principal Place of Business:

508 PINTAIL CIRCLE
AUBURNDALE, FL 33823

Current Mailing Address:

P.O. BOX 631
HIGHLAND CITY, FL 33846

New Mailing Address:

FEI Number: 01-0736930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOCKENBERRY, KATHY
817 BUTTERCUP DRIVE
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

YERKEY, DELYNN
4811 CLAYTON RD
KATHLEEN, FL 33849 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: DELYNN YERKEY

01/16/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP
Name: JONES, FELICIA
Address: 6014 DOE CIRCLE WEST
City-St-Zip: LAKELAND, FL 33809

Title: D
Name: LUTTERMOSER, SHELLY
Address: 1340 MOORES LANE
City-St-Zip: MULBERRY, FL 33860

Title: S
Name: WHITING, JULIE
Address: 474 AMETHYST AVE.
City-St-Zip: AUBURNDALE, FL 33823

Title: T
Name: WHITING, BOBBI J
Address: 508 PINTAIL CR.
City-St-Zip: AUBURNDALE, FL 33823

Title: D
Name: REEDER, VALERIE
Address: 1633 CRYSTALVIEW TRAIL
City-St-Zip: LAKELAND, FL 33801

Title: D
Name: HOSEGOOD, STACEY
Address: 3137 WEST BELLA VISTA STREET
City-St-Zip: LAKELAND, FL 33810

I hereby 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 all other like empowered.

SIGNATURE: BOBBI JO WHITING

T

01/16/2012

Electronic Signature of Signing Officer or Director

Date