2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008868

FILED Jan 14, 2007 Secretary of State

Entity Name: LIGHTHOUSE BAPTIST CHURCH OF HOLIDAY, INC.

Current P	rincipal Place of Business:	New Principal Plac	e of Business:
1121 US 1 HOLIDAY,	9 FL 34691 US		
Current N	lailing Address:	New Mailing Addre	ess:
PO BOX 6 FARPON :	02 SPRINGS, FL 34688		
El Number	: 54-2089483 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
Name and	Address of Current Registered Agent:	Name and Address	of New Registered Agent:
361 WEST	GARE R JR WINDS DR RBOR, FL 34683 US		
	named entity submits this statement for the e of Florida.	purpose of changing its register	red office or registered agent, or both,
n the State	e of Florida.	purpose of changing its register	red office or registered agent, or both,
n the State	e of Florida.		red office or registered agent, or both, Date
n the State	e of Florida. ´ RE:	ent	
n the State	e of Florida. ** RE:Electronic Signature of Registered Ag	ent	Date
n the State SIGNATUI DFFICER: ittle: lame: .ddress:	e of Florida. RE: Electronic Signature of Registered Ag S AND DIRECTORS: T () Delete DOBBERTEEN, DAVID 1447 WEYFORD LN	ent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR
on the State DFFICER: itle: lame: ddress: itly-St-Zip: itle: lame: ddress:	e of Florida. RE: Electronic Signature of Registered Ag S AND DIRECTORS: T () Delete DOBBERTEEN, DAVID 1447 WEYFORD LN HOLIDAY, FL 34691 T () Delete ST. JOHN, ED 911 TODDSMILL TRACE	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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: LEGARE R HOLE, JR RA 01/14/2007