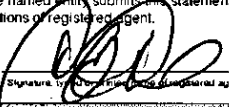
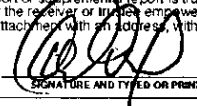


FILED
May 13, 2003 8:00 am
Secretary of State

05-13-2003 90045 019 ****61.25

2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N02000008928					
1. Entity Name ST. PETE LIGHTHOUSE CHRISTIAN CENTER, INC.					
Principal Place of Business 2807 WESLEYAN DR PALM HARBOR, FL 34684			Mailing Address 2807 WESLEYAN DR PALM HARBOR, FL 34684		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		Country	
4. FEI Number 57-1137994				☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
COX, KEITH 2807 WESLEYAN DR PALM HARBOR, FL 34684				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:  (NOTE: Registered Agent signature required when registering) DATE: _____					
FILE NOW: FEE IS \$61.25		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	P KEITH COX 2807 WESLEYAN DR. PALM HARBOR, FL 34684	☐ Delete	TITLE	D JAMES STEPHENSON 2043 Osble Dr. Holiday, FL 34691	☐ Change ☐ Addition
NAME	S ATHENA COX 2807 WESLEYAN DR. PALM HARBOR, FL 34684	☐ Delete	NAME		☐ Change ☐ Addition
STREET ADDRESS	T LARRY HANSLEY 1024 Mary Jane Ln. Dunedin, FL 34698	☐ Delete	STREET ADDRESS		☐ Change ☐ Addition
CITY-STATE-ZIP	D ALAN HOWELL 4998 Harbor Woods Dr. Palm Harbor, FL 34684	☐ Delete	CITY-STATE-ZIP		☐ Change ☐ Addition
	D JOHN LLOYD 1850 McMullen Booth Rd Clearwater, FL 33759	☐ Delete			☐ Change ☐ Addition
	D KEN BOAZ 1722 Oakdale Ln E Clearwater, FL 34624-6439	☐ Delete			☐ Change ☐ Addition
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
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 liquidator 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:  (NOTE: Registered Agent signature required when registering) DATE: _____ Daytime Phone: _____					

90133381



☐ CHECK HERE IF MAKING CHANGES

CR2E037 (10/02)