2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009704

Entity Name: GLOBAL LIGHTHOUSE, INC.

FILED Jan 24, 2005 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:	
	EETGUM RUN , FL 33830			
Current Mailing Address:			New Mailing Address:	
	EETGUM RUN , FL 33830			
FEI Number	: 32-0098293	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
	EETGUM RUN	US		
The above in the Stat	e named entity : e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
SIGNATU	RE:			
		nic Signature of Registered Age	ent	Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () JOSEPH, PHIL 6015 SWEETG BARTOW, FL :	UM RUN	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () JOSEPH, SUSA 6015 SWEETG BARTOW, FL :	UM RUN	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () JOSEPH, VARO 4929 IRONWO BARTOW, FL :	OD TRL	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () JOSEPH, MARI 4929 IRONWO BARTOW, FL :	OD TRL	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () TRANSUE, ROI 2729 EWELL F LAKELAND, FL	RD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	D () SAMUAL, ELSE 2232 COUPLES		Title: Name: Address:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

SIGNATURE: PHILIP K. JOSEPH PRES 01/24/2005

LAKELAND, FL 33813

City-St-Zip: