

1104000004396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

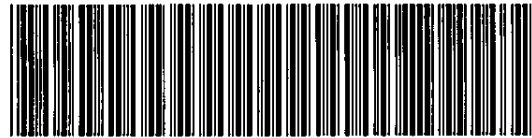
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200211229552

08/23/11--01008--020 **35.00

FILED
2011 AUG 23 AM 9:22
SUNSHINE & STATE
TALLAHASSEE, FLORIDA

RA
Chang
8-24-11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lighthouse Christian Academy
Name of Corporation

DOCUMENT NUMBER: 004000004396

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Katherine Richardson
Name of Contact Person

Lighthouse Christian Academy
Firm/Company

1960 US 1
Address

St. Aug. FL. 320
City/State and Zip Code

Princezzhotmama@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Phyllis Sanzone at (904) 819 5980
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Lighthouse Christian Academy Private School Inc.
2. The principal office address: 1960 US 1
St. Aug. Fl. 320
3. The mailing address (if different): 2800 N. 6th St. Unit 1 PHB#265
St. Augustine, Fl- 32084
4. Date of incorporation/qualification: May 3, 2004 Document number: NC4000004396
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Phyllis Sanzone
110 Circle DR. E
St. Aug, Fl. 32084

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Katherine Richardson
2800 N. 6th St. Unit 1 PHB#265
P.O. Box NOT acceptable
St. Augustine, Fl- 32084

FILED
2011 AUG 23 AM 9:22
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Phyllis Sanzone
Signature of an officer or director

Phyllis Sanzone
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Katherine Richardson
Signature of Registered Agent

8-18-2011
Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***