

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 16, 2005 8:00 am
Secretary of State

04-14-2005 90090 031 ****70.00

00011011



04092005 Chg-NP GR2E037 (10/03)

DOCUMENT # N04000004398			
1. Entity Name HARBOR LIGHT CHRISTIAN CHURCH, INC.			
Principal Place of Business 3770 US 1 S ST AUGUSTINE, FL 32086		Mailing Address 3770 US 1 S ST AUGUSTINE, FL 32086	
2. Principal Place of Business 705 DeleSpine Ave.		3. Mailing Address P.O. Box 4258	
Sute, Apt. #, etc.		Sute, Apt. #, etc.	
City & State St. Aug. FL		City & State St. Aug. FL	
Zip 32084	Country U.S.A.	Zip 32085	Country U.S.A.
5. Name and Address of Current Registered Agent SANZONE, PHYLLIS 705 DELESPINE AVE ST AUGUSTINE, FL 32084			
7. Name and Address of New Registered Agent			
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 _____
Printed name, typed or printed name of registered agent and the filer (if applicable) (NOTE: Registered Agent signature is required when name is being changed) DATE _____

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fee	Make check payable to Florida Department of State
---	--	---------------------------------------	--

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
NAME	TITLE	STREET ADDRESS	CITY-STATE-ZIP	NAME	TITLE	STREET ADDRESS	CITY-STATE-ZIP
P SANZONE, PHYLLIS	☐ Delete	705 DeleSpine Ave	St. Aug, FL 32084	Change ☒ Addition ☐			
V SANZONE, CYNTHIA	☐ Delete	705 DeleSpine Ave	St. Aug., FL 32084	Change ☒ Addition ☐			
S KAYLOR, HEATHER	☒ Delete	705 DeleSpine Ave	St. Aug., FL 32084	Change ☒ Addition ☐			
T FULLER, DENIS	☒ Delete	705 DeleSpine Ave	St. Aug., FL 32084	Change ☐ Addition ☐			
	☐ Delete			Change ☐ Addition ☐			
	☐ Delete			Change ☐ Addition ☐			

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 trustee 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: Phyllis E. Sanzone 4-13-05
Typed name and typed or printed name of signing officer or director