2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Mar 15, 2006 8:00 am **Secretary of State** DOCUMENT # N05000002120 03-15-2006 90113 036 ****70.00 LIGHTHOUSE KIDS OF BRUMC, INC. Principal Place of Business Mailing Address 5858 44TH AVENUE EAST 5858 44TH AVENUE EAST **UUUUTUU** BRADENTON, FL 34203 BRADENTON, FL 34203 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02052006 Chg-NP CR2E037 (11/05) 4. FEI Number 90-0121041 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FICKEY, SUSAN R 5858 44TH AVENUE EAST Street Address (P.O. Box Number is Not Acceptable) BRADENTON, FL 34203 City 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** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Due by May 1, 2006 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE Addition FRICK, MARIA B. 893 134TH STREET E. FICKEY, SUSAN R NAME NAME STREET ADDRESS 9007 60TH AVENUE EAST STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34202 CITY-ST-ZIP BRADENTON, FL 34212 Delete TITLE TITLE ☐ Change Addition OVERSTREET, MARTHA B. 3607 61ST DRIVE EAST STAHL, KAY NAME STREET ADDRESS 1020 67TH COURT EAST STREET ADDRESS BRADENTON, FL 34203 CITY-ST-7IP BRADENTON, FL 34208 CITY-ST-ZIP TITLE Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Channe ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ☐ Addition NAME NAME

FILED

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

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

☐ Delete

Susan Reficely

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

Reflecting Susan R Fickey-President, 2/27/06

☐ Addition

☐ Change