

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 16, 2006 8:00 am
Secretary of State

02-16-2006 90059 019 *****70.00

DOCUMENT# N05000010156

1. Entity Name

PENTECOSTAL LIGHTHOUSE FELLOWSHIP OF LAKE
PLACID, INC.



Principal Place of Business

413 HIGHLANDS LAKE DR.
LAKE PLACID FL 33852

Mailing Address

413 HIGHLANDS LAKE DR.
LAKE PLACID FL 33852



2. Principal Place of Business

127 DAL Hall Blvd

3. Mailing Address

P.O. Box 1663

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/05)

City & State

Lake Placid, FL

City & State

Lake Placid FL

4. FEI Number

06-1764306

Applied For

Not Applicable

Zip

33852

Country

U.S.A.

Zip

33862

Country

U.S.A.

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BARFIELD, RONNELL Ronnel
413 HIGHLANDS LAKE DR.
LAKE PLACID FL 33852

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW - FEE IS \$61.25
Due By May 1, 2006

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 D ☐ Delete
NAME BARFIELD, RONNELL Ronnel
STREET ADDRESS 413 HIGHLANDS LAKE DR.
CITY-ST-ZIP LAKE PLACID FL 33852

TITLE D ☐ Delete
NAME CARROLL, ROBERT
STREET ADDRESS 413 HIGHLANDS LAKE DR.
CITY-ST-ZIP LAKE PLACID FL 33852

TITLE D ☐ Delete
NAME CARROLL, SHANA J.
STREET ADDRESS 413 HIGHLANDS LAKE DR.
CITY-ST-ZIP LAKE PLACID FL 33852

TITLE D ☐ Delete
NAME BARFIELD, KALA
STREET ADDRESS 413 HIGHLANDS LAKE DR.
CITY-ST-ZIP LAKE PLACID FL 33852

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Change ☐ Addition
NAME Carroll, Robert
STREET ADDRESS 223 Dartmoore St. (Mailing-PO Box 2119)
CITY-ST-ZIP Lake Placid, FL 33852 Lake Placid FL 33862

TITLE D ☒ Change ☐ Addition
NAME Carroll, Shana J. (Mailing-PO Box)
STREET ADDRESS 223 Dartmoore St. 2119
CITY-ST-ZIP Lake Placid, FL 33852 Lake Placid FL 33862

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE:

Ronnel Barfield

2/4/06 (863) 699-2822