2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007568

FILED May 10, 2008 Secretary of State

Entity Name: LIGHTHOUSE BAPTIST CHURCH OF INTERCESSION CITY, INC

Current F	Principal Place of Business:	New Principal Place	of Business:
	EPHERD LN SSION CITY, FL 33848		
Current l	Mailing Address:	New Mailing Addres	s:
P O BOX INTERCE	823 ESSION CITY, FL 33848		
In accorda	r: 20-5147388 FEI Number Applied For() nce with s. 607.193(2)(b), F.S., the corporation did d Address of Current Registered Agent:		Certificate of Status Desired () of New Registered Agent:
HOLLEY,			
INTERCE	EPHERD LN ESSION CITY, FL 33848 US e named entity submits this statement for th	e purpose of changing its registere	d office or registered agent, or both,
INTERCE The above in the State	ESSION CITY, FL 33848 US e named entity submits this statement for the te of Florida.	e purpose of changing its registere	d office or registered agent, or both,
INTERCE	SSION CITY, FL 33848 US e named entity submits this statement for th te of Florida. JRE:		
INTERCE The above in the State SIGNATU	e named entity submits this statement for the te of Florida. JRE: Electronic Signature of Registered A	Agent	Date
INTERCE The above in the State SIGNATU	SSION CITY, FL 33848 US e named entity submits this statement for th te of Florida. JRE:	Agent	
INTERCE The above in the State SIGNATU	e named entity submits this statement for the enamed entity submits this statement for the enamed entity submits this statement for the ten of Florida. JRE: Electronic Signature of Registered A RS AND DIRECTORS: D () Delete HOLLEY, ALAN 438 SHORT DR	Agent	Date
The abovin the Star SIGNATU OFFICER Title: Name: Address:	e named entity submits this statement for the of Florida. JRE: Electronic Signature of Registered A S AND DIRECTORS: D () Delete HOLLEY, ALAN 438 SHORT DR POINCIANA, FL 34759 D () Delete EADES, LARRY 214 ELLSWORTH DR	Agent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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

SIGNATURE: ALAN HOLLEY D 05/10/2008