2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010219

FILED Jun 29, 2009 Secretary of State

Entity Name: LIGHTHOUSE POINT OUTREACH CENTER, C.O.G., INC.

Current Principal Place of Business:		New Principal	New Principal Place of Business:	
	IXIE HIGHWAY LD BEACH, FL 33065			
Current Mailing Address:		New Mailing A	New Mailing Address:	
321 NW 3 DEERFIEL	RD AVE LD BEACH, FL 33441			
In accordan	: 61-1464841 FEI Number Applied For() FE ice with s. 607.193(2)(b), F.S., the corporation did not rec I Address of Current Registered Agent:		ress of New Registered Agent:	
		ose of changing its rec	sistered office or registered agent, or both	
	e of Florida.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
SIGNATU				
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () Delete SMITH, ALVIN 321 NW 3RD STREET DEERFIELD BEACH, FL 33441	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () Delete HALL, MELINDA 4795 NW 113 TERRACE SUNRISE, FL 33323	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	T () Delete TURNER, LEROY 356 NW 7TH COURT DEERFIELD BEACH, FL 33441	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () Delete TURNER, ULYSES 488 NW 2ND TERRACE DEERFIELD BEACH, FL 33441	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	S () Delete MCKEVER, ANGELA 5900 NW 14TH STREET LAUDERHILL, FL 33313	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MELINDA C. HALL VP 06/29/2009