## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000010984

FILED Apr 10, 2008 Secretary of State

Entity Name: LIGHTHOUSE BAPTIST CHURCH OF CITRUS COUNTY, INCORPORATED

**Current Principal Place of Business: New Principal Place of Business:** 974 W G MARTINELLI BLVD CITRUS APRINGS, FL 344343232 **Current Mailing Address: New Mailing Address:** 974 W G MARTINELLI BLVD CITRUS APRINGS, FL 344343232 FEI Number: 26-0258320 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BURTON, F. JESS 974 W G MARTINELLI BLVD CITRUS APRINGS, FL 344343232 US 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BURTON, F. JÉSS Name: Name: 15364 SW 23 CT RD Address: Address: City-St-Zip: OCALA, FL 34473 City-St-Zip: Title: Title: ( ) Delete () Change () Addition BRAMLETT, WALDO S Name: Name: Address: 3559 W CYPRESS DRIVE Address: City-St-Zip: DUNNELLON, FL 344333232 City-St-Zip: Title: () Delete Title: () Change () Addition JOHNSON, RICHARD Name: Name: 9861 SW 101 PLACE Address: Address: City-St-Zip: OCALA, FL 34481 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: NELSON, MARGARET Name: 12291 N. OAKLEAF TERRACE Address: Address: City-St-Zip: DUNNELLON, FL 34433 City-St-Zip: Title: () Delete Title: () Change () Addition DODSON, PATRICIA Name: Name: 10248 N DELTONA BLVD Address: Address: City-St-Zip: CITRUS SPRINGS, FL 34434 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition MCCREADY, MARILYN MCCREADY, MARILYN Name: Name: Address: 8718 SW 60 CIRCLE Address: 8718 SW 60 CIRCLE OCALA, FL 34476 OCALA, FL 34476 City-St-Zip: City-St-Zip:

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: MARILYN MCCREADY FS 04/10/2008