

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08033

FILED  
Feb 24, 2006  
Secretary of State

**Entity Name:** THE LIGHTHOUSE MISSION OF ORLANDO, INC.

**Current Principal Place of Business:**

2554 OVERLAND RD.  
C/O MARGARET CARTER  
APOPKA, FL 32703

**New Principal Place of Business:**

**Current Mailing Address:**

2554 OVERLAND RD.  
C/O MARGARET CARTER  
APOPKA, FL 32703

**New Mailing Address:**

**FEI Number:** 59-2546666

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CARTER, MARGARET M  
2554 OVERLAND RD.  
APOPKA, FL 32703 US

**Name and Address of New Registered Agent:**

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:**

Title: ED ( ) Delete  
Name: CARTER, MARGARET,  
Address: 2554 OVERLAND RD.  
City-St-Zip: APOPKA, FL 32703

Title: D ( ) Delete  
Name: WASHINGTON, G.H.,  
Address: 1460 MERCY DR. #14  
City-St-Zip: ORLANDO, FL 32808

Title: D ( ) Delete  
Name: LOWERY, EVELYN  
Address: 1710 GUINYARD WAY  
City-St-Zip: ORLANDO, FL

Title: D ( ) Delete  
Name: ALEXANDER, CEASAR,  
Address: 3037 GRANDULA DR.  
City-St-Zip: ORLANDO, FL 32811

Title: DRS ( ) Delete  
Name: SALANITRO, BARBARA  
Address: 7639 DAETWYLER DRIVE  
City-St-Zip: ORLANDO, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARGARET CARTER

ED

02/24/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date