

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09788

FILED  
Jan 14, 2005  
Secretary of State

**Entity Name:** LIGHTHOUSE BAPTIST CHURCH OF NORTH PORT, FLORIDA INC.

**Current Principal Place of Business:**

14251 CHANCELLOR BLVD.  
PORT CHARLOTTE, FL 33953

**New Principal Place of Business:**

**Current Mailing Address:**

14251 CHANCELLOR BLVD.  
PORT CHARLOTTE, FL 33953

**New Mailing Address:**

**FEI Number:** 59-2717224

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHEFFIELD, PHIL  
154 VENANGO ST  
PORT CHARLOTE, FL 33954 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: D ( ) Delete  
Name: SHEFFIELD, PHILLIP,  
Address: 154 VENANGO ST  
City-St-Zip: PORT CHARLOTE, FL 33954

Title: D ( ) Delete  
Name: BERRYMAN, RUE  
Address: 5040 IVY CT.  
City-St-Zip: NORTH PORT, FL 34289

Title: D ( ) Delete  
Name: GIDDENS, CURTIS  
Address: 4320 MULGRAVE AVE  
City-St-Zip: NORTH PORT, FL 34287

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PHILLIP SHEFFIELD

D

01/14/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date