

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Monrath
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # N10169 (3)

95 MAR 20 PM 2:15

**1. Corporation Name
DOMINIC HARBOR LIGHT, INC.**

Principal Place of Business
2500 HWY 27 S
3306
CLERMONT FL 34711
US

Mailing Address
P O BOX 748
LOUGHMAN FL 33858
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/11/1985
3a. Date of Last Report 02/03/1994
4. FEI Number 59-2541237
Applied For Not Applicable

2. Principal Place of Business
21 *40 Christian Retreat Campground*
Suite, Apt. #, etc. *#513, 1200 Glory Way Blvd*
City & State *Bradenton, FL 34202*
Zip *34202* Country *USA*

2a. Mailing Address
26 *40 Christian Retreat Campground*
Suite, Apt. #, etc. *#513, 1200 Glory Way Blvd*
City & State *Bradenton, FL 34202*
Zip *34202* Country *USA*

5. Certificate of Status Desired **\$0.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
EDWARDS, VIOLET M.
2500 S. US 27
CLERMONT FL 34711

10. Name and Address of New Registered Agent
81 Name *Edwards, Violet M*
82 Street Address (P.O. Box Number is NOT Acceptable) *1200 Glory Way Blvd*
83 *40 Christian Retreat Campground, #513*
84 City *Bradenton* FL 85 Zip Code *34202*

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *Violet M. Edwards* DATE *15 March 1995*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS	
TITLE	SD
NAME	EDWARDS, ARCH R.
STREET ADDRESS	2500 S. US 27
CITY-ST-ZIP	CLERMONT FL
TITLE	PD
NAME	EDWARDS, VIOLET M.
STREET ADDRESS	2500 S. US 27
CITY-ST-ZIP	CLERMONT FL
TITLE	TD
NAME	LEACH, KAREN E.
STREET ADDRESS	7212 BURGESS
CITY-ST-ZIP	BARNHART MO
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<i>Edwards, Arch R</i>
1.3 STREET ADDRESS	<i>40 Christian Retreat Campground, 1200 Glory Way Blvd</i>
1.4 CITY-ST-ZIP	<i>Bradenton, FL 34202</i>
2.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<i>Edwards, Violet M.</i>
2.3 STREET ADDRESS	<i>40 Christian Retreat Campground, 1200 Glory Way Blvd</i>
2.4 CITY-ST-ZIP	<i>Bradenton, FL 34202</i>
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 917, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Violet M. Edwards* DATE *15 March 1995* *904.242-1335*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR