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Sep 05 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N12855 (5) 1. Corporation Name THE CHARITY LIGHTHOUSE OF FAITH, INC.					
Principal Place of Business 3205 Dodge Street Tampa, FL 33605			Mailing Address 3205 Dodge Street Tampa, FL 33605		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 25 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 12/28/1985 3a. Date of Last Report 07/16/1996 4. FEI Number 59-2719215 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent WILSON, NAMON JR. 3205 Dodge Street TAMPA, FL 33605			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.					
SIGNATURE: NAMON WILSON, JR. 06/24/1997 <small>Signature, typed or printed name of registered agent and title if applicable (If not a registered agent, signature is required when reinstalling)</small>					
12. OFFICERS AND DIRECTORS <input type="checkbox"/> DELETE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		
R/D WILSON, NAMON JR. 3205 DODGE ST. TAMPA, FL			T/D ALLEN, ROMA D. SR. 1106 GERSHAL AVENUE PITTSBURGH, NEW JERSEY 08302		
V/D WILSON, VALERIE 3205 DODGE ST. TAMPA, FL			T/D MULDROW, ERMA 3611 E. HENRY AVENUE, TAMPA, FL		
T/D FRAIZER, LEWIS 3416 N. 15 ST. TAMPA, FL			T/D WATLEY, VIOLET E 7901 HOLLY LEA CT. #A TAMPA, FL		
S WATLEY, VIOLET E 7901 HOLLY LEA CT. #A TAMPA, FL			300002286453 -09/08/97--01003--009 ***70.00		
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.					
SIGNATURE: NAMON WILSON, JR. 06/24/1997 (813) 623-6685 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

CR2E037 (9/96)