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FILED  
May 15 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

Mailing Address

3205 DODGE STREET  
TAMPA FL 33605

3205 DODGE STREET  
TAMPA FL 33605



3. Date Incorporated or Qualified

12/28/1985

4. FEI Number

59-2719215

☒ Applied For

☐ Not Applicable

2. Principal Place of Business

21 3205 DODGE ST.

2a. Mailing Address

26 3205 DODGE ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 TAMPA FL

City & State

28 TAMPA FL

Zip

Country

24 33605

25

Zip

29 33605

Country

30

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILSON, NAMON JR  
3205 DODGE STREET  
TAMPA FL 33605

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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.*

(NOTE: Registered Agent signature required when reinstating)

DATE

5/1/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P D ☐ DELETE

NAME WILSON, NAMON JR.  
STREET ADDRESS 3205 DODGE STREET  
CITY-ST-ZIP TAMPA FL 33605

1.1 TITLE ☐ Change ☐ Addition

TITLE V D ☐ DELETE

NAME WILSON, VALERIE  
STREET ADDRESS 3205 DODGE STREET  
CITY-ST-ZIP TAMPA FL 33605

1.2 NAME ☐ Change ☐ Addition

TITLE T D ☐ DELETE

NAME MULBROW, ERMA  
STREET ADDRESS 3611 EAST HENRY AVENUE  
CITY-ST-ZIP TAMPA FL

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE T D ☐ DELETE

NAME ALLEN, ROMA D S.R.  
STREET ADDRESS 1106 GERSHAL AVENUE  
CITY-ST-ZIP PITTSBORO NJ 08302

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S ☐ DELETE

NAME WATLEY, VIOLET E  
STREET ADDRESS 7901 HOLLY LEA COURT, # A  
CITY-ST-ZIP TAMPA FL

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

14. I 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

*Valerie Wilson* 5/1/98

CR2E037 (10/97)