2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17171

Apr 30, 2009 Secretary of State

Entity Name: HIGHLANDS LIGHTHOUSE MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business: 626 LEE RD ORLANDO, FL 32810 **Current Mailing Address: New Mailing Address:** PO BOX 680307 ORLANDO, FL 32868 FEI Number: 59-2804639 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: D'ALESIO, REV. JOHN 17557 CR 455 MONTVERDE, FL 34756 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete DP () Change () Addition D'ALESIO, REV. JOHN Name: Name: 17557 CR 455 Address: Address: City-St-Zip: MONTVERDE, FL 34756 US City-St-Zip: Title: DVT Title: (X) Change () Addition () Delete D'ALESIO, MARY JANE Name: STEELE-D'ALESIO, MARJORIE CAROL Name: Address: 17557 CR 455 Address: 17557 CR 455 City-St-Zip: MONTVERDE, FL 34756 City-St-Zip: MONTVERDE, FL 34756 Title: () Delete Title: (X) Change () Addition STEELE-D'ALESIO, MARJORIE C STEELE, IVER C IV Name: Name: Address: 17557 CR 455 Address: 1840 FRITWELL CRT City-St-Zip: MONTVERDE, FL 34756 City-St-Zip: OCOEE, FL 34761 () Delete Title: Title: SD () Change (X) Addition Name: Name: BALTHASER, DELILA M Address: Address: 4107 NE 44TH WAY City-St-Zip: City-St-Zip: WILDWOOD, FL 34785

I hereby certify that the information supplied with this filing does not qualify 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: MARJORIE CAROLE STEELE-D'ALESIO DVT 04/30/2009