

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30559

FILED
Feb 15, 2009
Secretary of State

Entity Name: LIGHTHOUSE POINTE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

3303 LIGHTHOUSE PT. LANE
JACKSONVILLE, FL 32250 US

New Principal Place of Business:

Current Mailing Address:

3303 LIGHTHOUSE PT. LANE
JACKSONVILLE, FL 32250 US

New Mailing Address:

FEI Number: 59-3497279

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOSTER, MICHAEL
3380 LIGHTHOUSE POINT LANE
JACKSONVILLE BEACH, FL 32250 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: P () Delete
Name: FOSTER, MICHAEL S
Address: 3380 LIGHTHOUSE PT. LANE
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: TD () Delete
Name: AVERILL, ROBERT C
Address: 3339 LIGHTHOUSE PT LN
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: SD () Delete
Name: GERSBECK, CHARLES
Address: 3315 LIGHTHOUSE PT. LANE
City-St-Zip: JACKSONVILLE, FL 32250 US

Title: D () Delete
Name: MANAHAN, DONALD
Address: 3319 LIGHTHOUSE PT LN
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: D () Delete
Name: WALLIS, STEVE
Address: 3391 LIGHTHOUSE PT LANE
City-St-Zip: JACKSONVILLE, FL 32250 US

Title: D () Delete
Name: CREEL, MARY
Address: 3395 LIGHTHOUSE PT LANE
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: REMSEN, VALERIE
Address: 3311 LIGHTHOUSE PT. LANE
City-St-Zip: JACKSONVILLE, FL 32250 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: TOWNSEND, JOHN
Address: 3384 LIGHTHOUSE PT LANE
City-St-Zip: JACKSONVILLE, FL 32250 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT C. AVERILL

TD

02/15/2009

Electronic Signature of Signing Officer or Director

Date