FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

141

DOCUMENT # N45339 (1) 1. Corporation Name LIGHTHOUSE GALLERY FOUNDATION, INC.				A ARAINIAN RAS RIARA RASAR ANGAR JAKAR AN	# IRBUIJAN BU BIABU BIHAB INGB BIHAB AND SON BIBIN	
Principal Place of Business		Mailing Address				
373 TEQUESTA DR TEQUESTA FL 33469		373 TEQUESTA DR TEQUESTA FL 33469				
				Date Incorporated or Qualified	3a. Date of Last Report	
				3. Date Incorporated or Qualified 09/25/1991	05/01/1995	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0319184	Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicable \$8.75 Additional	
22		27		Certificate of Status Desired	Fee Required	
Oity & State	•	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country		or intangible tax under s. 199.032,	
24	25	29	30	Florida Statutes	Yes No	
	9. Name and Address of Currer	it Hegistered Agent	81 Name	10. Name and Address of New	negistered Agent	
SCHREC	ENGOST, FAYE		82 Street	Address (P.O. Box Number It Not Accept	able)	
373 TEQUESTA DR				3 TEQUESTA DRIV		
TEQUEST	TA FL 33469		83			
			84 City	Equesta	FL 85 75 CO	
11. Pursuant t	to the provisions of Sections 617.0502	2 and 617.1508, Florida Statute	se the shows named o	arparation submits this statement for the r	surviose of changing its registered office	
or register familiar wit	red agent, or both, in the State of Flori th, and accept the obligations of, Sect	da. Such change was authorize tion 617.0503, Flonda Statutes,	ed by the corporation's	board of directors. I hereby accept the ap		
SIGNATURE	HARRY MESSERSMITH	+ 1/01/4/1/980gmil			4.29.96	
12.	Signature, typed or printed name of registered agent OFFICERS AN	t and light it applicable. (No. IDD DIRECTORS	TE Registered Agent signature 13.		FFICERS AND DIRECTORS IN 12	
TITLE	DP	DELETE	1.1 TITLE	D	Change Addition	
NAME	STELTER, PAUL J 16942 WATERBEND DR. #15	a	1.2 NAME			
STREET ADDRESS	JUPITER FL	5	1.3 STREET ADDRESS 1.4 CITY - ST - ZIP			
CITY-ST-ZIP TITLE	DS	DELETE	2 1 TITLE	DP	Change 🔲 Addition	
NAME	IMLE, MARY		2 2 NAME			
STREET ADDRESS	16641 NARROWS DRIVE JUPITER FL		2 3 STREET ADDRESS			
CITY-ST-ZIP TITLE	D	DELETE	2 4 CITY-ST-ZIP 3.1 TIFLE		☐ Change ☐ Addition	
NAME	CORR, MARY SNOW		3.2 NAME			
STREET ADDRESS	291 RIVER DR		3 3 STREET ADDRESS			
CITY-ST-ZIP	TEQUESTA FL	DELETE	3.4. CHTY-ST-ZIP 4.1 TITLE		☐ Change ☐ Addition	
TITLE NAME	FETTER, GLENN C.	Dittele	4.2 NAME			
STREET ADDRESS	16649 NARROWS DR		4 3 STREFT ADDRESS			
CITY-ST-ZIP	JUPITER FL	A-8	44 CITY-ST-ZIP		Marine Marine	
TITLE	GOODNER, JOHN M.	DELETE	5 1 TITLE 5 2 NAME	DVP DAMA F.	Change Addition	
NAME STREET ADDRESS	16040 126TH TER N		5.3 STREET ADDRESS	Inni Albert U.S. Ha	HELAY DALE	
CITY-ST-ZIP	JUPITER FL		5 4 CITY - ST - ZIP	CLICK, DAVID F, 1001 NORTH U.S. HM JUDITER, PL 3747	<i>'</i>	
TITLE	DT NCCOWAN JOHN W	DELETE	6 1 TITLE		☐ Change ☐ Addition	
NAMÉ SZOCET ADODOGO	MCGOWAN, JOHN W 6392 FOX RUN CIRCLE S.S		6.2 NAME			
STREET ADDRESS CITY-ST-ZIP	JUPITER FL		6 3 STREET ADDRESS 6 4 CITY - ST - ZIP			
14. I do hereb	y certify that the information supplied	with this filing is voluntarily furn	ished and does not qu	alify for the exemption stated in Section 1 accurate and that my signature shall have t	19.07(3)(k), Florida Statutes I further he same legal effect as if made under	
oath; that	it the information indicated on this ann I am an officer or director of the corp n Block 12 or Block 13 if changed, or	oration or the receiver or truster	e empowered to execu	ite this report as required by Chapter 617,	Florida Statutes; and that my name	
	The state of the s	A CA	• . L.		64-10-	
SIGNAT	TURE:	LESTURE DAY OF SIGNING OFFICE	perto/Trea	eures 4/20/96	(407) 832 - 3349	
	JOHN W. N	IcGOWAN		poor to	= -j = 10000 0	

CR2E037 (12/95)