


FILE NOW: FILING FEE IS \$61.25

FILED

May 15 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Morton</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N45339** (1)

1. Corporation Name

**LIGHTHOUSE GALLERY FOUNDATION, INC.**

Principal Place of Business

Mailing Address

**373 TEQUESTA DR  
TEQUESTA FL 33469**

**373 TEQUESTA DR  
TEQUESTA FL 33469-3027**



3. Date Incorporated or Qualified  
**09/25/1991**

3a. Date of Last Report  
**05/01/1996**

2. Principal Place of Business

2a. Mailing Address

**21** Suite, Apt. #, etc.

**26** Suite, Apt. #, etc.

**22** City & State

**27** City & State

**23** Zip

Country

**28** Zip

Country

**24**

**25**

**29**

**30**

4. FEI Number  
**65-0319184**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MESSERSMITH, HARRY  
373 TEQUESTA DRIVE  
TEQUESTA FL 33469**

**81** Name **INSERRA, MARGARET**

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

**373 TEQUESTA DRIVE**

**83**

**84** City

**TEQUESTA**

**FL**

**85** Zip Code  
**33469**

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

*Margaret Inserra*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**4.28.97**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME **D**  
STREET ADDRESS **STELTER, PAUL J**  
CITY-ST-ZIP **16942 WATERBEND DR. #159**  
**JUPITER FL**

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME **DP**  
STREET ADDRESS **IMLE, MARY**  
CITY-ST-ZIP **16841 NARROWS DRIVE**  
**JUPITER FL**

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME **D**  
STREET ADDRESS **CORR, MARY SNOW**  
CITY-ST-ZIP **291 RIVER DR**  
**TEQUESTA FL**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME **D**  
STREET ADDRESS **FETTER, GLENN C.**  
CITY-ST-ZIP **16849 NARROWS DR**  
**JUPITER FL**

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME **DVP**  
STREET ADDRESS **CLICK, DAVID F. ESQ.**  
CITY-ST-ZIP **1001 CORTH US HIGHWAY ONE**  
**JUPITER FL**

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME **DT**  
STREET ADDRESS **MCGOWAN, JOHN W**  
CITY-ST-ZIP **6392 FOX RUN CIRCLE S.S**  
**JUPITER FL**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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:

*Margaret Inserra*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**4/14/97 (561) 832-3799**

Daytime Phone # 0044361

CR2E037 (9/96)