

2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # **N 51425**

1. Entity Name

Christian Lighthouse Network, Inc

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00DEC-29 PM 1:57

Principal Place of Business

Mailing Address

**P.O. Box 13422
Tallahassee, Florida
32317-3422**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

59-3158785

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

(Rev. Willie J. Robinson)
13990 Hanley Robinson Court
Tallahassee, FL 32308-9561

Name

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

City

FL

Zip Code

8. 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.

Rev Willie J. Robinson Executive Director

SIGNATURE

Rev. Willie J. Robinson

100003532301--2

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

01/11/01 01019 010

****70.00 ****70.00

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Director Rev. Willie J. Robinson P.O. Box 13422 Tallahassee, FL 32317-3422	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director/Administrator Min. Sarah W. Robinson 6631 Tim Tam Trail Tallahassee, FL 32308	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director/Program Bro. Moses L. Robinson 13990 Hanley Robinson Court Tallahassee, FL 32308	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director/Senior Advisor Pastor Joseph W. Henderson 870 Violet Street Tallahassee, FL 32302	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary/Youth Director Sis. Tanya Wright 2008, East Park Ave, Apt C Tallahassee, FL 32302	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director/Outreach Program Sis Joyce K. Hubon 14802 North 1 st Dr. Ave Apt B-21 Tampa, FL 33613	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director/District Evangelism Elden Randy Jackson 4192, 53rd Ave, South St Petersburg, FL 33711-2742	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director (At Large) Sis Edith M. Robinson 13990 Hanley Robinson Court Tallahassee, FL 32308-9561	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director At Large Sis Mary Ann Trout 227 Waldon Circle Quincy, FL 32351	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director (At Large) Sis. Cyrille Proszilla Hackler 1600 Pullen Road, Apt # 11-C Tallahassee, FL 32303	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director (At Large) Sis Lessie M. King Box 13091 Tallahassee, FL 32317-3091	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Mission Coordinator Sis Patricia Ann Johnson 2742 Connie Adrien Lane Tallahassee, FL 32303	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rev. Willie J. Robinson (Rev. Willie J. Robinson) 12/29/00

(850) 531-0731, Ext 1
422-4625

CR2E037 (9/99)

Additional director on attached sheet

Additional Director

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(13)

Title	Director / At Large
Name	Bro. Kelton E. Robinson
Address	6799 Veterans Memorial Drive
City State zip	Tallahassee, FL 32308

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December 29, 2000

Dear Sir(s),

I am requesting that the not-for-profit Organization Christian Light Home Network, Inc. be exempted from non filing fees (Annual Report) that was due to be filed in the year 2000.

There have been a problem with our physical and mailing addresses. We did not get proper notices informing us of the dissolution if not filed by a certain time and we did not receive an annual report form in the mail.

Thank you for your kind consideration of this matter.

Sincerely,

Rev. Willie J. Robinson, Executive Director

Rev. Willie J. Robinson