2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002013

FILED Mar 01, 2005 Secretary of State

Entity Name: SAINT ANDREW'S LIGHTHOUSE, INC.

Current Principal Place of Business: New Principal Place of Business: 1797 BEACH BLVD JACKSONVILLE BEACH, FL 32250 US **Current Mailing Address: New Mailing Address:** 1797 BEACH BLVD JACKSONVILLE BEACH, FL 32250 US FEI Number: 31-1489868 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GRAHAM, ARTHUR U 432 SOUTH BEACH STREET DAYTONA BCH, FL 32214 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 () Change () Addition HENSHAW, EDWARD L Name: Name: 2320 SOUTH THIRD STREET Address: Address: City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: Title: DS () Delete Title: () Change () Addition ASHER, SANDRA L Name: Name: Address: 2355 COVINGTON CREEK DR. W. Address: City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: Title: () Delete Title: () Change () Addition GREGG, JOHN F Name: Name: Address: 3726 EAST SEA HAWK STREET Address: City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: Title: DVP () Delete Title: () Change () Addition Name: BLAKER, MICHAEL REV. Name: Address: 13757 HARBOR CREEK PLACE Address: City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: Title: () Delete Title: () Change () Addition CANGEMI, JOHN R MD Name: Name: 7551 HOLLYRIDGE RD. Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: Title: () Delete Title: (X) Change () Addition FINLEY, RENEE' SMITH, BRENDA E Name: Name: Address: 3427 OAK STREET Address: 12953 DEEP RIVER WAY JACKSONVILLE, FL 32205 JACKSONVILLE, FL 32224 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: EDWARD L. HENSHAW DP 03/01/2005