

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Jan 23, 2008  
Secretary of State

DOCUMENT# N96000002431

Entity Name: LIGHTHOUSE INTERNATIONAL WORSHIP CENTER ASSEMBLIES OF GOD, INC.

**Current Principal Place of Business:**

650 NW AIROSO BLVD  
PORT ST. LUCIE, FL 34983

**New Principal Place of Business:**

**Current Mailing Address:**

650 NW AIROSO BLVD  
PORT ST. LUCIE, FL 34983

**New Mailing Address:**

FEI Number: 31-1468008      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

BRACERO, ANGEL L JR  
650 NW AIROSO BLVD  
PORT SAINT LUCIE, FL 34983      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: BRACERO, ANGEL L JR  
Address: 613 SW BACON TERRACE  
City-St-Zip: PT ST LUCIE, FL 34953

Title: ST      ( ) Delete  
Name: VELAZQUEZ, OLGA  
Address: 1285 SW ADDIE STREET  
City-St-Zip: PT ST LUCIE, FL 34983

Title: D      ( ) Delete  
Name: BRACERO, ANNETTE  
Address: 613 SW BACON TERRACE  
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: D      ( ) Delete  
Name: CORTES, REGULO  
Address: 4240 SW CALLICOE ST  
City-St-Zip: PORT ST LUCIE, FL 34953

Title: D      ( ) Delete  
Name: SOLANO, CARLOS  
Address: 4401 SW BABYLON ST  
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: D      (X) Delete  
Name: TORRES, FREDERICK  
Address: 652 SW FRADO AVE  
City-St-Zip: PORT SAINT LUCIE, FL 34953

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

Title: D      (X) Change ( ) Addition  
Name: CROSSMAN, MIGDALIA  
Address: 1774 SE WESTMORELAND AVENUE  
City-St-Zip: PORT SAINT LUCIE, FL 34952

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: ANNETTE BRACERO

Electronic Signature of Signing Officer or Director

DIR

01/23/2008

\_\_\_\_\_ Date