

**2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**DOCUMENT # N9600006487**

1. Entity Name  
**LIGHTHOUSE BAPTIST CHURCH OF FT. MYERS, INC.**



**FILED  
Feb 23, 2004 8:00 am  
Secretary of State**

02-23-2004 90031 026 \*\*\*\*61.25

22016070



01152004 Chg-NP CR2E037 (10/03)

Principal Place of Business  
297 KINGSTON DR  
FORT MYERS, FL 33905

Mailing Address  
297 KINGSTON DR  
FORT MYERS, FL 33905

2. Principal Place of Business  
**12800 Orange River Blvd**  
Suite, Apt. #, etc.

3. Mailing Address  
**12800 Orange River Blvd.**  
Suite, Apt. #, etc.

City & State  
**FT. Myers, FL**

City & State  
**FT. Myers, FL**

Zip  
**33905-6019**

Zip  
**33905-6019**

Country  
**Lee**

Country  
**Lee**

4. FEI Number  
**65-0721590-65-0942797** Applied For  
Not Applicable

5. Certificate of Status Desired  
 **\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**GRINER, BILLY G  
18791 OLD BAYSHORE ROAD  
NORTH FORT MYERS, FL 33917**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Billy G. Griner, President*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

*1-18-04*

**Filing Fee is \$61.25  
Due by May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution.  **\$5.00** May Be  
Added to Fees

Make check payable to  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**PD  
GRINER, BILLY G  
18791 OLD BAYSHORE ROAD  
NORTH FORT MYERS, FL 33917**

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**V  
LEWIS, CHARLES  
5870 CARTER RD  
FORT MYERS, FL 33905**

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**SD  
BAYS, GLADYS  
315 NEW YORK DRIVE  
FORT MYERS, FL 33905**

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**TD  
DURDIN, ANN  
3765 MARION ST  
FT MYERS, FL 33905**

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  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:

*Billy G. Griner* *Billy G. Griner* *1-18-04* *239-543-4719*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #