

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 21, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90097 020 \*\*\*\*61.25

<b>DOCUMENT # N96000006578</b>			
<b>1. Entity Name</b> LIGHTHOUSE POINTE HOMEOWNERS ASSOCIATION, INC.			
<b>Principal Place of Business</b> 3298 SUMMIT BLVD. SUITE 4 PENSACOLA, FL 32503		<b>Mailing Address</b> 3298 SUMMIT BLVD. SUITE 4 PENSACOLA, FL 32503	
<b>2. Principal Place of Business - No P.O. Box #</b> 908 Gardengate Cir Suite, Apt., etc.		<b>3. Mailing Address</b> 908 Gardengate Cir Suite, Apt., etc.	
<b>City &amp; State</b> Pensacola, FL Zip 32504 Country USA		<b>City &amp; State</b> Pensacola, FL Zip 32504 Country USA	
<b>6. Name and Address of Current Registered Agent</b> ETHERIDGE, RAY O. 3298 SUMMIT BLVD SUITE 4 PENSACOLA, FL 32503		<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) 908 Gardengate Circle City Pensacola FL Zip Code 32504	
<b>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.</b>			
SIGNATURE _____ (NOTE: Registered Agent signature required when reissuing) DATE _____			
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>			
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP DP GUNDRUM, STEVEN 1534 BRIGATEN CT GULF BREEZE, FL 32563	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP VPD DUNN, ANDREW 1521 WINDING SHORE DR GULF BREEZE, FL 32563	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP DP GRAY, BENJAMIN 1720 Lighthouse Pt. Dr. Gulf Breeze, FL 32563	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TD SONNTOG, MIKE 6424 OLD HARBOR CT GULF BREEZE, FL 32563	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP SD WEBER, WANDA 6478 SURFSIDE COVE GULF BREEZE, FL 32563	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP SD BRILL, KEN PO BOX 5099 GULF BREEZE, FL 32563	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TD BEARD, DILLON 1531 BRIGATEN CT GULF BREEZE, FL 32563	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP D GRUBB, JIM 6419 OLD HARBOR CT GULF BREEZE, FL 32563	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP D NICHOLS, LES 6364 OLD HARBOR CT GULF BREEZE, FL 32563	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP D DENDY, EARL 6369 OLD HARBOR CT GULF BREEZE, FL 32563	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.</b>			
<b>SIGNATURE:</b> <i>BR</i>		Date <i>4/14/08</i> Daytime Phone # <i>414/08</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

ATTACHMENT  
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Supplemental Page

Lighthouse Pointe Homeowners Association, Inc.  
Document #N96000006578

Additions to Officers/Directors:

D  
O'Brien, Todd  
6384 Old Harbor Ct.  
Gulf Breeze, FL 32563