

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # N97000000048**

1. Entity Name

**LIGHTHOUSE CHAPEL CHURCH OF JESUS CHRIST OF UNIT****FILED**  
**Mar 21, 2001 8:00 am**  
**Secretary of State**

03-21-2001 90037 010 \*\*\*\*61.25

Principal Place of Business

Mailing Address

802 4TH ST. S. W.  
RUSKIN FL 33570802 4TH ST. S. W.  
RUSKIN FL 33570

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

59-3421058

Applied For

Not Applicable

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

NYMARK, DENNIS  
110 S PEBBLE BEACH BLVD  
SUN CITY CENTER FL 33573

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**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 PD ☒ Delete  
NAME MONTGOMERY, A C  
STREET ADDRESS 911 GOLFVIEW WOODS DR  
CITY-ST-ZIP RUSKIN FL 33573TITLE PD ☒ Change ☐ Addition  
NAME THOMAS DICKSON  
STREET ADDRESS 10804 GARDEN VILLAGE CT.  
CITY-ST-ZIP THONOTOSASSA, FL. 33592-3023TITLE VD ☒ Delete  
NAME NIEMIEC, JOSEPH  
STREET ADDRESS 1008 VENTANA DR.  
CITY-ST-ZIP RUSKIN FL 33573TITLE VD ☒ Change ☐ Addition  
NAME MONTGOMERY, AC.  
STREET ADDRESS 911 GOLFVIEW WOODS DR.  
CITY-ST-ZIP RUSKIN, FL. 33573TITLE SDT ☐ Delete  
NAME ALEXANDER, KENT P  
STREET ADDRESS 1405 VENTANA DR.  
CITY-ST-ZIP RUSKIN FL 33573TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE TD ☒ Delete  
NAME SHANE, RANDALL  
STREET ADDRESS 1107 VENTANA DR.  
CITY-ST-ZIP RUSKIN FL 33573TITLE TD ☒ Change ☐ Addition  
NAME MONTGOMERY, MICHAEL R.  
STREET ADDRESS 1209 VENTANA DR.  
CITY-ST-ZIP RUSKIN, FL. 33573TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

MICHAEL R. MONTGOMERY  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-16-01

813-633-9149

CR2E037 (10/00)