

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 28, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # N97000002397**



1. Entity Name

**SHINING LIGHT COMMUNITY SERVICES CORPORATION**

Principal Place of Business

**2229 CARVER ST  
FORT MYERS FL 33916**

Mailing Address

**2229 CARVER ST  
FORT MYERS FL 33916**



2. Principal Place of Business

3. Mailing Address

1st MOORE

CR2E037 (10/05)

Suite, Apt #, etc.

Suite, Apt #, etc.

City & State

City & State

4. FEI Number

**31-1581299**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**THOMAS, TONI  
3429 DORA STREET  
FORT MYERS FL 33916**

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

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  
Due By May 1, 2006**

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 ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DP  
THOMAS, TONI  
3429 DORA STREET  
FORT MYERS FL 33916**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
GASKIN, FRED  
2605 SIXTH STREET W  
LEHIGH ACRES FL 33971**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DS  
HAUGABOOK, TOLLEY  
3 SKIPTON CIRCLE  
FORT MYERS FL 33905**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DVP  
CURRY, ALVIN L  
2197 MITCHELL CT  
FORT MYERS FL 33916**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DT  
POPE, IRISTINE  
3408 FRANKLIN STREET  
FORT MYERS FL 33916**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
JACKSON, SHELIA  
2127 TOWLES STREET  
FORT MYERS FL 33916**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☐ Addition  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**U00000540889  
05/10/06-80035-019 61.25**

☐ Change ☐ Addition  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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☐ Change ☐ Addition  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE

4/17/06