

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 23, 2005 08:00 AM
Secretary of State

DOCUMENT # N99000002191	
1. Entity Name LIGHTHOUSE CHURCH OF JESUS CHRIST OF THE APOSTOLIC FAITH, INC.	
Principal Place of Business	Mailing Address
13224 JACKSON LARGO, FL 33740	PO BOX 93 LARGO, FL 33779



03192005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2566326	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LAFRAY, WARREN T 615 TURNER STREET CLEARWATER, FL 33756	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when renewing) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SWINTON, WILLIE 1482 WASHINGTON AVE S CLEARWATER, FL 33776
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT MCCRAY, EMERSON 1132 HARRIS LN CLEARWATER, FL 33756
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HARRIS, WILLIE 13224 JACKSON LARGO, FL 33774
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWINTON, SAM SR 13224 JACKSON LARGO, FL 33774
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRADLEY, OLIN 13224 JACKSON LARGO, FL 33774
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, RALIEGH 13224 JACKSON LARGO, FL 33774

**DO NOT WRITE
IN THIS SPACE**

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 an officer like empowered.

SIGNATURE: Willie Swinton, Willie Swinton 3/14/05 (727) 442-7707

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #