

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 20, 2003 8:00 am
Secretary of State

05-20-2003 90067 020 ****61.25

DOCUMENT # *N99000004591*

1. Entity Name

*LIGHTHOUSE BAPTIST CHURCH
OF PINELLAS INC*



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5545 62 AV. N.

Suite, Apt. #, etc.

3. Mailing Address

5545 62 AVE N.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PINELLAS PARK FL

City & State

PINELLAS PARK FL

4. FEI Number

59-359 2312

Applied For

Not Applicable

Zip

33781

Country

PINELLAS

Zip

33781

Country

PINELLAS

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

REV. BRANSON ROGERS

Street Address (P.O. Box Number is Not Acceptable)

5545 62 AV. N.

City

PINELLAS PARK

FL

Zip Code

33781

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IN THIS SPACE**

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

FEE IS \$81.25

Initial or Amended UBR

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
*R
REV. BRANSON ROGERS
5545 62 AV. N.
PINELLAS PARK FL 33781*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*U
REV. MAURICE CANON
5545 62 AV. N.
PINELLAS PARK FL 33781*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*T
REV. GEORGE LITTELL
5545 62 AV. N.
PINELLAS PARK FL 33781*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*D
RALPH L. ROGERS
5545 62 AV. N.
PINELLAS PARK FL 33781*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*D
JACK LINDSEY
5545 62 AV. N.
PINELLAS PARK FL 33781*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*D
ELMER SEBASTIAN
5545 62 AV. N.
PINELLAS PARK FL 33781*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Rev. Branson Rogers

5/16/03 727-541-5400

CR2E037B (12/02)