

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006855

FILED
Mar 15, 2012
Secretary of State

Entity Name: LIGHTHOUSE ARCHAEOLOGICAL MARITIME PROGRAM, INC.

Current Principal Place of Business:

81 LIGHTHOUSE AVE.
SAINT AUGUSTINE, FL 32080

New Principal Place of Business:

Current Mailing Address:

81 LIGHTHOUSE AVE.
SAINT AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: 59-3656411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLEMING, KATHY
81 LIGHTHOUSE AVENUE
ST. AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CHRM
Name: SHAAK, GRAIG D DR.
Address: PO BOX 117800
City-St-Zip: GAINESVILLE, FL 32611

Title: SECY
Name: STREETER, GREG
Address: 780 QUEEN'S HARBOR BLVD
City-St-Zip: JACKSONVILLE, FL 32225

Title: A DR
Name: FLEMING, KATHY A
Address: 218 S. MATANZAS BLVD
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: TRES
Name: FINNEGAN, JOSEPH
Address: 279 ST. GEORGE ST.
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: V CH
Name: MCCLURE, GEORGE
Address: 81 KING STREET #A
City-St-Zip: ST. AUGUSTINE, FL 32084

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: KATHY FLEMING

RA

03/15/2012

Electronic Signature of Signing Officer or Director

Date