2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000066847

Entity Name: LIGHTHOUSE YOUTH SERVICES INC.

FILED Sep 09, 2009 Secretary of State

| Current Principal Place of Business: | | | New Prince | New Principal Place of Business: | | |
|---|---|--|---|--|--|--|
| 12510 MEI TAMPA, F | MORIAL HWY L 33635 US | 6 | | | | |
| Current Mailing Address: | | | New Maili | New Mailing Address: | | |
| 12510 MEI TAMPA, F | MORIAL HWY L 33635 US | 6 | | | | |
| FEI Number | : 35-2342600 | FEI Number Applied For () | FEI Number Not App | licable () Certificate of Status Desired () | | |
| Name and | l Address of C | Current Registered Agent: | Name and | Address of New Registered Agent: | | |
| 12510 MÉI TAMPA, F The above | named entity | 5 | e purpose of changing | its registered office or registered agent, or bot | | |
| | e of Florida. | | | | | |
| SIGNATUI | | i. Cianatana af Danistana da | Δ | Dete | | |
| | Electror | nic Signature of Registered A | Agent | Date | | |
| | | 3(2)(b), F.S., the corporation dic g Trust Fund Contribution (). | I not receive the prior notic | ce. | | |
| OFFICER | S AND DIREC | TORS: | ADDITION | NS/CHANGES TO OFFICERS AND DIRECT | | |
| Title: Name: Address: City-St-Zip: | CEO (WRIGHT, NAM 12510 MEMOR TAMPA, FL 33 | IAL | Title: Name: Address: City-St-Zip: | ()Change ()Addition | | |
| Title: Name: Address: City-St-Zip: | WRIGHT, NAM | POINT VILLAGE APT. 207 | Title: Name: Address: City-St-Zip: | ()Change ()Addition | | |
| Title: Name: Address: City-St-Zip: | WRIGHT, AND | POINT VILLAGE APT. 207 | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | HURDLE, NELS | B DOWNS APT. 181 | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: | S () BRAME, LARR 12510 MEMOR | | Title: Name: Address: | S (X) Change () Addition BRAME, LARRY II 12510 MEMORIAL HWY | | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip: TAMPA, FL 33635

SIGNATURE: NAMON O. WRIGHT SR. CEO 09/09/2009

City-St-Zip: TAMPA, FL 33635