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**Apr 11 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000029194 (5)
1. Corporation Name
LIGHTHOUSE ENTERPRISES OF NASSAU COUNTY, INC.



Principal Place of Business
**1316 N. SNAPPER LANE
FERNANDINA BEACH FL 32034**

Mailing Address
**1316 N. SNAPPER LANE
FERNANDINA BEACH FL 32034-4481**

3. Date Incorporated or Qualified
04/18/1994

3a. Date of Last Report
02/29/1996

4. FEI Number
59-3238841

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing, Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip Country

24. 25.

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip Country

29. 30.

9. Name and Address of Current Registered Agent
**BURCH, SANDRA L
1316 N. SNAPPER LANE
FERNANDINA BEACH FL 32034**

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Sandra L. Burch (NOTE: Registered Agent signature required when reinstating)

SIGNATURE Sandra L. Burch DATE 4/8/97

12. OFFICERS AND DIRECTORS

1.1 TITLE DELETE
NAME **PD BURCH, ROBERT A SR.**
STREET ADDRESS **1316 N. SNAPPER LANE**
CITY-ST-ZIP **FERNANDINA BEACH FL 32034**

2.1 TITLE DELETE
NAME **VSTD ROSE, GENE**
STREET ADDRESS **726 OWENS RD.**
CITY-ST-ZIP **YULEE FL 32097**

3.1 TITLE DELETE

4.1 TITLE DELETE

5.1 TITLE DELETE

6.1 TITLE DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Robert A. Burch 4-5-97 President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day:me Phone #

CR2E034 (9/96)