## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** P97000059674 (6)

LIGHTHOUSE POINT GUESTHOUSE, INC.

FILEU SECRETARY OF STATE

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Principal Place of Business Mailing Address 3450 BUSCHWOOD PARK DRIVE, SUITE 195 3450 BUSCHWOOD PARK DRIVE, SUITE 195 TAMPA FL 33618 TAMPA FL 33618 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>07/08/1997</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3466678 26 Not Applicable Suite, Apt. #, etc Suite Apt. #. etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country  $Z_{\rm IP}$ Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. ☐ Yes □ No 25 29 30 • 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KENNELLY, JOHN S 4950 N DIXIE HWY, SUITE A 82 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33334 83 03/20/98--01016--003 84 City \*\*\*\*448**.** 🛅 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 Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typed or pointed name of requisioned agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. **DELETE** Change Addition PD 1.1 TITLE TITLE NAME VALENTI, DARRELL J 1.2 NAME STREET ADDRESS 2388 NE 30TH CT 1.3 STREET ADDRESS LIGHTHOUSE POINT FL 33064 CITY-ST-ZIP 1.4 C(TY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition TITLE 4 1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- 7IP DELETE ☐ Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY - ST - ZIP 5.4 CITY - \$1 - ZIP DELETE Change - Addition TITLE 6.1 THLE NAME 6.2 NAME STREET ADDRESS **63 STREET ADDRESS** CITY-ST-ZIP

14. 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 Thereby certify that the information supplied with this tilling does not qualify for the exemptor stated in Section 1.19.07(3)f), Florida Statutes. Trumber certify that the information indicated on this arrival report or supplicational arrival 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 relevier or trusted 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 all achiment with an address.

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