## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 27, 2005 8:00 am Secretary of State **DOCUMENT # P99000092355** 04-27-2005 90308 033 \*\*\*150.00 LIGHTHOUSE REALTY, INC. Principal Place of Business Mailing Address 936 U.S. HIGHWAY 1 936 U.S. HIGHWAY 1 SEBASTIAN, FL 32958 SEBASTIAN, FL 32958 2. Principal Place of Business 3. Mailing Address 1603 US HIGHWAY 1603 US HIGHWAY 04212005 Chg-P CR2E034 (10/03) City & State City & State SEBASTIAN 4. FEI Number Applied For SEBASTIAN FL 65-0959834 Not Applicable Country USA Country \$8.75 Additional 5. Certificate of Status Desired 32958 USA 32958 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DAUID N. JAMAR JAMAR, DAVID N Street Address (P.O. Box Number is Not Acceptable) 936 U.S. HIGHWAY 1 SEBASTIAN, FL 32958 1603 US HIGHWAY 1 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 registered agen the obligations of SIGNATURE Signature, typed or pri of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PTD TITLE □ Delete TILLE ☐ Change Addition GREGORY POWERS 7280 BELMONT AVENUE NE NAME JAMAR, DAVID N NAME STREET ADDRESS 936 U.S. HIGHWAY 1 STREET ADDRESS BELMONT, MI 49306 CITY-ST-ZIP SEBASTIAN, FL 32958 CITY-ST-7IP SD TITLE TITTE Delete ☐ Change Addition NAME COX, JACKLENE R NAME 7950 BRIGHTON MANOR STREET ADORESS STREET ADDRESS VERO BEACH, FL 32966 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-70P TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CDY-ST-78 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi), 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

OMED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED