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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90042 028 ***150.00

DOCUMENT # V07059 1. Corporation Name

LIGHTHOUSE MANAGEMENT & REALTY. INC.

EMITIOUSE WATCHERT & TEACHT WO						
Principal Place of Business Mailing Address						((661) gillit EB(1) (661) State State (61) Gibts State Stat
16 CHURCH STREET 16 CHURCH STREET						
OSPREY FL 34229 OSPREY FL 34229						DO NOT WRITE IN THIS SPACE
US						3. Date Incorporated or Qualifed
					•	01/15/1992
2. Principal Place of Business 2a. Mailing Address			···			4. FEI Number Applied For
26						65-0306422 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired \$8.75 Additional
22 27			· · ·			Fee Required
City & State City & State			~ .			6. Election Campaign Financing \$5.00 May Be
23 28			<u> </u>	···		Trust Fund Contribution Added to Fees
Zip Country Zip 24 25 29 3			_			
24	25 25 Of Current		<u>""</u>			10. Name and Address of New Registered Agent
Name and Address of Current Registered Agent				81	Name	
J. LLOYD KEITH				82 :	Ctroot Addre	ess (P.O. Box Number is Not Acceptable)
16 CHURCH STREET				02	Street Addre	ess (P.O. Box Number is Not Acceptable)
OSPREY FL 34229			İ	83		
				84 (City	E 85 Zip Code
11. Pursuant to the previsions 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 or directors. Thereby accept the appointment as registered agent, I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with a familiar wit						
Signature, typed or private name of registered agent and title if applicable. (NOTE: 12. OFFICERS AND DIRECTORS				ngent si		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DVS	DELETE	13.	LE		. Change Addition
NAME	KEITH, SANDRA LEE		1.2 NA	ΜE		
STREET ADDRESS	16 CHURCH ST	•	1.3 STI	REETAL	ODRESS	p.ct
CITY-ST-ZIP	OSPREY FL		1.4 CITY-S		MP	
TITLE	DPT	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	KEITH, JOHN LLOYD		2.2 NA	ME		
STREET ADDRESS	16 CHURCH ST		2.3 STI	REET A	DDRESS	
CITY-ST-ZIP	OSPREY FL 2.		2.4 CI	TY-ST-2	ZIP	
TITLE		☐ DELETE	3.1 ∏	LE	-	☐ Change ☐ Addition
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STREET ADDRESS			3.3 STI	REETAL	DORESS	
CITY+ST-ZIP			•	ry-st-2	ZIP	Character Charac
TITLE		☐ DELETE	4.1 TIT			☐ Change ☐ Addition
NAME			4.2 N			
STREET ADDRESS					DDRESS	
CITY-ST-ZIP				Y-ST-Z	IP	☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TIT			Criange Addition
NAME			5.2 NA		nnpecc	•
STREET ADDRESS					DDRESS	
CITY-ST-ZIP		☐ DELETE	6.1 TIT	Y-ST-2	ur	Change ☐ Addition
TITLE			6.2 NA			, Classification

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 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 inside amounted 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 parallechment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

MEUIRED NOT PURE ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR