

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12402

Entity Name: LIGHTHOUSE TABERNACLE INC.**Current Principal Place of Business:**14555 SOUTH HWY 301
SUMMERFIELD, FL 34491**Current Mailing Address:**P.O. BOX 716
SUMMERFIELD, FL 34491 US**FEI Number:** 59-2954825**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**RAMSEY, ANTHONY S
11837 SE 99TH TERRACE
BELLEVIEW, FL 34420 US*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.***SIGNATURE:** ANTHONY S RAMSEY

03/17/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	ST
Name	MANKIN, CATHERINE W
Address	800 NW 63RD PL
City-State-Zip:	OCALA FL 34475
Title	DIRECTOR
Name	RAMSEY, ANTHONY SCOTT
Address	11837 SE 99TH TERRACE
City-State-Zip:	BELLEVIEW FL 34420
Title	DIRECTOR
Name	BURNHAM, BRENDA FAYE
Address	13000 SE 32ND CT
City-State-Zip:	BELLEVIEW FL 34420
Title	PRESIDENT
Name	RAMSEY, ANTHONY SCOTT
Address	11837 SE 99TH TERRACE
City-State-Zip:	BELLEVIEW FL 34420

Title	DIRECTOR
Name	MANKIN, CATHERINE W
Address	800 NW 63RD PL
City-State-Zip:	OCALA FL 34475
Title	VP
Name	SMITH, MARY PAULINE
Address	15455 S.E. 73RD AVE
City-State-Zip:	SUMMERFIELD FL 34491
Title	DIRECTOR
Name	NEWKIRK, ANGELA KAY
Address	13000 SE 32ND CT
City-State-Zip:	BELLEVIEW FL 34420

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTHONY RAMSEY

PRESIDENT

03/17/2021

Electronic Signature of Signing Officer/Director Detail

Date