## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000010663

Entity Name: BEACON OF LIGHT CHRISTIAN COLLEGE

FILED
May 01, 2018
Secretary of State
CC1181087115

**Current Principal Place of Business:** 

399 ALTA VISTA AVENUE FORT MYERS. FL 33905

## **Current Mailing Address:**

4218 19TH ST SW

LEHIGH ACRES. FL 33976

FEI Number: 46-4290102 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

VERA, NANCY DR. 4218 19TH ST SW LEHIGH ACRES, FL 33976 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: DR. NANCY VERA 05/01/2018

Electronic Signature of Registered Agent

Officer/Director Detail:

Title SECRETARY Title PRESIDENT

NameVERA, NANCY DR.NameTREVINO, ROBERTOAddress4218 19TH ST SWAddress399 ALTA VISTA AVENUECity-State-Zip:LEHIGH ACRES FL 33976City-State-Zip:FORT MYERS FL 33905

Title VP Title DIRECTOR

Name TREVINO, MICHELA Name ARIAS, GRISELDA

Address 399 ALTA VISTA AVENUE Address 399 ALTA VISTA AVENUE
City-State-Zip: FORT MYERS FL 33905 City-State-Zip: FORT MYERS FL 33905

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.

Date