

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720885

FILED
Apr 09, 2009
Secretary of State

Entity Name: THE CHAPEL-BY-THE-SEA

Current Principal Place of Business:

100 CHAPEL STREET
FORT MYERS BEACH, FL 33931

New Principal Place of Business:

Current Mailing Address:

P O BOX 2997
FORT MYERS BEACH, FL 33932

New Mailing Address:

FEI Number: 59-1163471 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOUTHWORTH, DEAN
169 IBIS STREET
FORT MYERS BEACH, FL 33931 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HICKS, LLOYD
Address: 16291 CROWN ARBOR WY
City-St-Zip: FORT MYERS, FL 33908

Title: S () Delete
Name: DIVINE, IRMA
Address: 2545 ESTERO BLVD #33
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: T () Delete
Name: LLOYD, CALVIN
Address: 4255 ESTERO BLVD
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: VP () Delete
Name: DOUGLAS, TOMNEY
Address: 4220 BAY BERRY BLVD #204
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TOMNEY, DOUGLAS
Address: 4220 BAY BERRY BLVD #204
City-St-Zip: FORT MYERS, FL 33919

Title: S (X) Change () Addition
Name: FAY, MARILYN
Address: 10100 CYPRESS COVE DR., APT. 147
City-St-Zip: FORT MYERS, FL 33908

Title: T (X) Change () Addition
Name: CALLAHAN, NEIL
Address: 18420 CUTLASS DR
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: VP (X) Change () Addition
Name: HICKS, LLOYD
Address: 16291 CROWN ARBOR WY
City-St-Zip: FORT MYERS, FL 33908

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DOUGLAS TOMNEY

P

04/09/2009

Electronic Signature of Signing Officer or Director

_____ Date