

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734513

FILED
Jan 14, 2009
Secretary of State

Entity Name: HERITAGE CHAPEL INC.

Current Principal Place of Business:

3375 GARCON PT RD
MILTON, FL 32583 US

New Principal Place of Business:

Current Mailing Address:

6630 CAROLINE ST.
MILTON, FL 32570 US

New Mailing Address:

FEI Number: 59-6586646

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CULPEPPER, KATIE G PRES
6630 CAROLINE STREET
MILTON, FL 32570 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: TDS () Delete
Name: TURNER, LISA C MS
Address: 2863 ROBINSON POINT ROAD
City-St-Zip: MILTON, FL 32583 US

Title: D () Delete
Name: GOLDEN, JEWELL W MS
Address: 6630 CAROLINE STREET
City-St-Zip: MILTON, FL 32570 US

Title: VD () Delete
Name: CULPEPPER, DW MR
Address: 6900 GOLDEN RANCH ROAD
City-St-Zip: MILTON, FL 32583 US

Title: PD () Delete
Name: CULPEPPER, KATIE G MS
Address: 6900 GOLDEN RANCH ROAD
City-St-Zip: MILTON, FL 32583 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KATIE G CULPEPPER

PD

01/14/2009

Electronic Signature of Signing Officer or Director

Date