2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2008 8:00 am
Secretary of State
03-21-2008 90015 004 ****61.25

DOCUMENT # F02000002473

1. Entity Name
INTERNATIONAL CONFERENCE OF POLICE CHAPLAINS, INC.

Principal Place of Business	Mailing Address
116 B- BENNING DRIVE DESTIN, FL 32541	P.O. BOX 5590 DESTIN, FL 32540

900453463

03182008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 86-0375673 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CHARLES R. LORRAIN 229 TALQUIN COVE DESTIN, FL 32541	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HUNGLER, CRAIG 2654 LOVE DRIVE COLUMBUS, OH 43221	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MCDUFFIE, WESLEY 4511 ST. ANDREWS DRIVE GRAND PRAIRIE, TX 75052	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V THOMAS, CYNDEE 1140 KIRKWOOD CIRCLE REDDING, CA 96003	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P-EL THOMAS, CYNDEE 1140 KIRKWOOD CIRCLE REDDING, CA 96003	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HARGRAVE, RICKEY 2318 ROCK HILL RD. MC KINNEY, TX 75070	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Awai, Keoki 205 N. Kalaheo Ave. Kailua, HI 96734	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T FIERS, JOHN R 8632 MARIESI DR INDIANAPOLIS, IN 46278	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HARGRAVE, RICKEY 2318 ROCK HILL RD. MC KINNEY, TX 75070	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P-EL MCDUFFIE, WESLEY 4511 ST. ANDREWS DRIVE GRAND PRAIRIE, TX 75052	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T FIERS, JOHN R 8632 MARIESI DR INDIANAPOLIS, IN 46278	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Charles R. Lorrain, Ex-Director 03/18/2008 850-654-9736
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #