## 20Q4 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## Jan 30, 2004 8:00 am Secretary of State DOCUMENT # N37402 1. Entity Name 01-30-2004 90064 024 \*\*\*\*61.25 RIVER RANCH CHAPEL, INC. Mailing Address Principal Place of Business 3200 RIVER RANCH BLVD. #30122 2955 RIVER RANCH BLVD. RIVER RANCH FL 33867 RIVER RANCH FL 33867 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) City & State Applied For City & State 4. FEI Number 59-3009891 Not Applicable Country Zio \$8.75 Additional Zip Country 5. Certificate of Status Desired $\Box$ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) HALL, BARBARA 565 WATER WAY DR. 150 HORSESHOE BEND **RIVER RANCH FL 33867** Zip Code City 33867 RIVER RANCH 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 agen CTR 1 - 23 - 04ELLERBROEK, SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Change Addition TD KLINGER, ARTHUR NAME NAME BOYD SPANGLER 94 ROAM ROAD STREET ADDRESS STREET ADDRESS 41 PALOMINO PATH RIVER RANCH FL 33867 CITY-ST-ZIP CITY-ST-ZIP RIVER RANCH, FL. ☐ Change ☐ Addition TITLE Delete TITLE HALL, BARBARA NAME : . NAME 565 WATERWAY DR. STREET ADDRESS STREET ADDRESS RIVER RANCH FL 33867 CITY-ST-ZIP CITY-ST-7IP ☐ Change TITLE Delete TITLE Addition NAME FRANCISCO, LOUISE ÑÁME **87 ROAN ROAD** STREET ADDRESS STREET ADDRESS RIVER RANCH FL 33867 CITY-ST-ZIP CITY-ST-ZIP TITLE-☐ Delete TITLE ☐ Change ☐ Addition ELLERBROEK, KARL NAME NAME 150 HORSHOE BEND STREET ADDRESS STREET ADDRESS **RIVER RANCH FL 33867-0150** CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE HALL, BARBARA NAME NAME 565 WATERWAY DRIVE STREET ADDRESS STREET ADDRESS RIVER RANCH FL 33867 CITY-ST-7IP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition ФTR NAME NAME STREET ADDRESS KARL ELLERBROEK STREET ADDRESS 150 HORSESHOE BEND CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

CTR KARL ELLERBROEK

ED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

1 - 23 - 04

Date

Daytime Phone #