

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005821

FILED  
Feb 02, 2009  
Secretary of State

Entity Name: CHAPEL CHRISTIAN UNIVERSITY, INC.

**Current Principal Place of Business:**

1138 PEACHTRRE ST  
COCOA, FL 32922 US

**New Principal Place of Business:**

**Current Mailing Address:**

870 AUSTRALIAN STREET  
MERRITT ISLAND, FL 32953

**New Mailing Address:**

FEI Number: 59-3227116

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCCLANAHAN, LELAND DR.  
870 AUSTRALIAN STREET  
MERRITT ISLAND, FL 32953 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: PCD ( ) Delete  
Name: MCCLANAHAN, LELAND DR.  
Address: 870 AUSTRALIAN STREET  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: VD ( ) Delete  
Name: MCCLANAHAN, LAVAUGHN A DR.  
Address: 870 AUSTRALIAN STREET  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D ( ) Delete  
Name: KECK, JA HARMON DR  
Address: 1729 PALMER DR  
City-St-Zip: PHARR, TX 78527

Title: D ( ) Delete  
Name: MCCLANAHAN, LOREN  
Address: 178 N W EUSTIS ST  
City-St-Zip: PORT SAINT LUCIE, FL 34983

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D (X) Change ( ) Addition  
Name: RAINEY, JUDITH DR  
Address: 1038 W. 18TH STREET  
City-St-Zip: ORLANDO, FL 32805

Title: D (X) Change ( ) Addition  
Name: MCCLANAHAN, LOREN  
Address: 1108 WOODSMERE PKWY.  
City-St-Zip: ROCKLEDGE, FL 32955

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: DR. LELAND MCCLANAHAN

PCD

02/02/2009

Electronic Signature of Signing Officer or Director

Date