

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000005409

**Entity Name:** SAINT FRANCIS CHAPEL CHRISTIAN CHURCH, INC.

**Current Principal Place of Business:**

7012 PARLIAMENT DRIVE  
TAMPA, FL 33619

**Current Mailing Address:**

P.O. BOX 89211  
TAMPA, FL 33689

**FEI Number:** 20-0501594

**Certificate of Status Desired:** No

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

CHERRENFRO, P L PHD  
422 CARDINAL COURT  
POINCIANA, FL 34759 US

*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:** DR. P L CHERRENFRO, SR. PH.D.

04/25/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            CHERRY, WILLIE  
Address        7012 PARLIAMENT DRIVE  
City-State-Zip: TAMPA FL 33619

Title            VP  
Name            CHERRENFRO, MARGRETTE  
Address        7012 PARLIAMENT DRIVE  
City-State-Zip: TAMPA FL 33619

Title            CHAIRMAN  
Name            WEST, CEPHES SR.  
Address        8612 NORTH HUNTLEY AVENUE  
City-State-Zip: TAMPA FL 33604

Title            COO  
Name            CHERRENFRO, LAWATHA  
Address        8612 NORTH HUNTLEY AVENUE  
City-State-Zip: TAMPA FL 33604

Title            CFO  
Name            CHERRENFRO, LA'JAUN  
Address        8612 NORTH HUNTLEY AVENUE  
City-State-Zip: TAMPA FL 33604

Title            SECRETARY  
Name            CHERRENFRO, P L JR.  
Address        8612 NORTH HUNTLEY AVENUE  
City-State-Zip: TAMPA FL 33604

Title            DIRECTOR  
Name            CHERRENFRO, P L DR.  
Address        422 CARDINAL COURT  
City-State-Zip: POINCIANA FL 33689

*I hereby 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 all other like empowered.*

**SIGNATURE:** DR. P L CHERRENFRO, SR., PH.D.

**DIRECTOR**

04/25/2013

Electronic Signature of Signing Officer/Director Detail

Date