

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006364

FILED
Apr 01, 2019
Secretary of State
3366644006CC

Entity Name: THE CHAPEL OF THE DIVINE SPIRIT, INC.

Current Principal Place of Business:

5811 AULD LANE
HOLIDAY, FL 34690

Current Mailing Address:

5811 AULD LANE
HOLIDAY, FL 34690

FEI Number: 59-3211624

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ORSATTI, CHAD T. ESQ.
2945 ALTERNATE 19 N
SUITE B
PALM HARBOR, FL 34683 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: CHAD T. ORSATTI, ESQ.

04/01/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name SPALDI, SANDRA REV.
Address 5811 AULD LANE
City-State-Zip: HOLIDAY FL 34690

Title T
Name DORE, PAM REV.
Address 5811 AULD LANE
City-State-Zip: HOLIDAY FL 34690

Title S
Name SPARKS, BEVERLY REV
Address 5811 AULD LANE
City-State-Zip: HOLIDAY FL 34690

Title VP
Name KERRIGAN, RITA REV
Address 5811 AULD LANE
City-State-Zip: HOLIDAY FL 34690

Title D
Name SEGER, PAT REV.
Address 5811 AULD LANE
City-State-Zip: HOLIDAY FL 34690

Title D
Name CLARK, SUSAN
Address 5811 AULD LANE
City-State-Zip: HOLIDAY FL 34690

Title ASST. SECRETARY
Name PAT, SEGER REV
Address 5811 AULD LANE
City-State-Zip: HOLIDAY FL 34690

Title D
Name NAGLITSCH, MARY
Address 5811 AULD LANE
City-State-Zip: HOLIDAY FL 34690

Continues on page 2

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: SPALDI , SANDRA REV.

PRESIDENT

04/01/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name EPLER, DORIS
Address 5811 AULD LANE
City-State-Zip: HOLIDAY 34690