## **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N9700006364

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. 2925 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. 03/18/2021

Electronic Signature of Registered Agent Date

## Officer/Director Detail:

TitlePTitleTNameCLARK, SUSANNameDORE, PAM REV.Address5811 AULD LANEAddress5811 AULD LANECity-State-Zip:HOLIDAY FL 34690City-State-Zip:HOLIDAY FL 34690

Title S Title VP

 Name
 BROWN, DON
 Name
 NAGLITSCH, MARY

 Address
 5811 AULD LANE
 Address
 5811 AULD LANE

 City-State-Zip:
 HOLIDAY FL 34690
 City-State-Zip: HOLIDAY FL 34690

Title TRUSTEE Title TRUSTEE

NameSPARKS, ERICANameHANNON, CAROLAddress5811 AULD LANEAddress5811 AULD LANECity-State-Zip:HOLIDAY FL 34690City-State-Zip: HOLIDAY FL 34690

Title TRUSTEE Title TRUSTEE

NameCOLLINS, TIM REV.NameEPLER, DORIS REV.Address5811 AULD LANEAddress5811 AULD LANECity-State-Zip:HOLIDAY FL 34690City-State-Zip: HOLIDAY 34690

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: SUSAN CLARK PRESIDENT 03/18/2021

FILED Mar 18, 2021

**Secretary of State** 

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