

2008 FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008 8:00 am
Secretary of State

01-22-2008 90067 025 ****61.25

DOCUMENT # 701825

1. Entity Name
 CHAPEL IN THE PINES PRESBYTERIAN CHURCH, INC.



Principal Place of Business
 4546 KELLY RD.
 TAMPA, FL 33615

Mailing Address
 4546 KELLY RD.
 TAMPA, FL 33615



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01032008 Chg-NP CR2E037 (12/06)

City & State

Zip Country

4. FEI Number
 59-1415754

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent

STEADHAM, KENNETH E
 8301 LOPEZ DR.
 TAMPA, FL 33615

5. Certificate of Status Desired \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 agent.

SIGNATURE _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	CHAMBLISS, JAMES	
STREET ADDRESS	1328 ECKLES DR	
CITY-ST-ZIP	TAMPA, FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	STEADHAM, KEN	
STREET ADDRESS	8301 LOPEZ DRIVE	
CITY-ST-ZIP	TAMPA, FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	SORRELL, BRUCE	
STREET ADDRESS	15613 JERICO DR.	
CITY-ST-ZIP	ODESSA, FL 32558	
TITLE	D	<input type="checkbox"/> Delete
NAME	WHITNEY, THOMAS	
STREET ADDRESS	4537 W. KNOX ST.	
CITY-ST-ZIP	TAMPA, FL 33614	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ROQUE, E. ROCK	
STREET ADDRESS	21245 PRESERVATION DRIVE	
CITY-ST-ZIP	LAND O' LAKES, FL 33638	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Hoffmann, Rebecca	
STREET ADDRESS	7403 W. Hanna Ave.	
CITY-ST-ZIP	Tampa, FL 33615	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Thomas J. Whitney 1-17-08 813-263-8891

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime PHONE #