

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 25, 2009
Secretary of State**

DOCUMENT# 709112

Entity Name: WESTWOOD ALLIANCE CHAPEL, INCORPORATED

Current Principal Place of Business:

4412 N. APOPKA VINELAND RD
ORLANDO, FL 32818 US

New Principal Place of Business:

Current Mailing Address:

4412 N. APOPKA VINELAND RD
ORLANDO, FL 32818 US

New Mailing Address:

FEI Number: 59-1438394 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNWELL, JON N PRES
540 N. MAIN ST.
WINTER GARDEN, FL 34787 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: VP () Delete
Name: RETALLACK, DON
Address: 2961 GOLDEN VIEW LN
City-St-Zip: ORLANDO, FL 32812

Title: S () Delete
Name: STEPP, GLENN
Address: 1031 ISLAND POINTE DRIVE
City-St-Zip: WINTER GARDEN, FL 32859

Title: T () Delete
Name: MCELHENY, BERNARD
Address: 1851 SPARKLING WATER CIRCLE
City-St-Zip: OCOEE, FL 34761

Title: AT () Delete
Name: STEPP, GLENN
Address: 1031 ISLAND POINTE DRIVE
City-St-Zip: WINTER GARDEN, FL 32859

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: RETALLACK, DON
Address: 2961 GOLDEN VIEW LN
City-St-Zip: ORLANDO, FL 32812 US

Title: S (X) Change () Addition
Name: ELDRIDGE, STUART
Address: 219 S. MAIN STREET
City-St-Zip: WINTER GARDEN, FL 34787 US

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

Title: AT (X) Change () Addition
Name: ELDRIDGE, STUART
Address: 219 D. MAIN STREET
City-St-Zip: WINTER GARDEN, FL 34787

Title: MEM () Change (X) Addition
Name: GOFF, LARRY
Address: 504 LEGACY PARK DRIVE
City-St-Zip: CASSELBERRY, FL 32707 US

Title: MEM () Change (X) Addition
Name: ZIRKEL, JAMES
Address: 219 MONTEGO INLET BLVD
City-St-Zip: LONGWOOD, FL 32779 US

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: JON N. DUNWELL

Electronic Signature of Signing Officer or Director

PRES

02/25/2009

Date