

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711866

FILED
Jan 07, 2008
Secretary of State

Entity Name: ARABA TEMPLE HOLDING COMPANY, INC.

Current Principal Place of Business:

2010 HANSON ST.
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

2010 HANSON ST.
FORT MYERS, FL 33901

New Mailing Address:

FEI Number: 59-1147875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPMAN, CECIL A.
13111 LAKE MEADOW DR
FORT MYERS, FL 33913 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: SD () Delete
Name: CHAPMAN, CECIL A
Address: 13111 LAKE MEADOW DR
City-St-Zip: FORT MYERS, FL 33913

Title: D () Delete
Name: FIRMES, JOHN A
Address: 1310 SE 44TH TER
City-St-Zip: CAPE CORAL, FL 33904

Title: P () Delete
Name: STEIN, GRAHAM A
Address: 8509 FAIRWAY BEND DRIVE
City-St-Zip: FORT MYERS, FL 33967

Title: D () Delete
Name: STILES, MELVIN
Address: 15451 ALLEN WAY
City-St-Zip: FORT MYERS, FL 33908

Title: D (X) Delete
Name: ADAMS, TED G
Address: 3384 NORTH KEY DRIVE APT A-7
City-St-Zip: NORTH FORT MYERS, FL 33903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: P (X) Change () Addition
Name: STILES, MELVIN
Address: 15451 ALLEN WAY
City-St-Zip: FORT MYERS, FL 33908

Title: D (X) Change () Addition
Name: ADAMS, TED G
Address: 3384 NORTH KEY DRIVE APT A-7
City-St-Zip: NORTH FORT MYERS, FL 33903

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

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: CECIL A CHAPMAN

SD

01/07/2008

Electronic Signature of Signing Officer or Director

Date