


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Apr 10, 2008 8:00 am
Secretary of State

04-10-2008 90023 001 ****61.25

DOCUMENT # 727898
1. Entity Name
SUNNY HILLS CHAPEL OF SUNNY HILLS, INC.



Principal Place of Business Mailing Address
C/O JESSIE OWENS C/O JESSIE OWENS
4311 HWY 77 4311 HWY 77
CHIPLEY FL 32428 CHIPLEY FL 32428
US US



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
4283 HWY 77 **P.O. Box 211**
Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E037 (10/07)

City & State City & State
Chipley FL **WAUSAU, FL**
Zip Country Zip Country
32428 **WASHINGTON** **32463-0211** **WASHINGTON**

4. FEI Number Applied For
59-2444782 Not Applicable

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

6. Name and Address of Current Registered Agent
**HOLMAN-
HOLMER, WILLIAM E
721 BRIDGEYARD ROAD
CHIPLEY FL 32428**

7. Name and Address of New Registered Agent
Name **Betty Snowden**
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 **Rev. William E. Holman (Pastor)** **3-28-08**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: 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	T	<input checked="" type="checkbox"/> Delete
NAME	OWENS, JESSIE	
STREET ADDRESS	4311 HWY 77	
CITY-ST-ZIP	CHIPLEY FL 32428	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	KELLEY, MARIE E	
STREET ADDRESS	1476 EVERETT RD.	
CITY-ST-ZIP	CHIPLEY FL 32428	
TITLE	P	<input type="checkbox"/> Delete
NAME	HOLMAN, EDDY	
STREET ADDRESS	729 BRICKYARD RD.	
CITY-ST-ZIP	CHIPLEY FL 32428	
TITLE	D	<input type="checkbox"/> Delete
NAME	SNOWDEN, J A	
STREET ADDRESS	1586 LEDGER RD	
CITY-ST-ZIP	CHIPLEY FL 32428	
TITLE	D	<input type="checkbox"/> Delete
NAME	JOHNS, CHARLES	
STREET ADDRESS	1507 EVERETT RD	
CITY-ST-ZIP	CHIPLEY FL 32428	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Betty Snowden	
STREET ADDRESS	1586 Ledger Rd	
CITY-ST-ZIP	Chipley FL 32428	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kelley, marie E.	
STREET ADDRESS	1476 EVERETT RD.	
CITY-ST-ZIP	CHIPLEY FL, 32428	
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 Section 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: **Betty Snowden Betty Snowden** **3-28-08 / 8506387854**