2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#731066

FILED Feb 25, 2009 Secretary of State

Entity Name: UPPER ROOM CHAPEL INC.

Current Principal Place of Business: New Principal Place of Business:

159 NORTH GAINS STREET OAK HILL, FL 32759

Current Mailing Address: New Mailing Address:

UPPER ROOM CHAPEL P.O. BOX 125 OAK HILL, FL 32759

FEI Number: 59-3544193 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VANORSDALE, JOAN E 12105 NEWPORT SOUND PL NEW SMYRNA BEACH, FL 32168 US

OFFICERS AND DIRECTORS:

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

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D () Delete
 Title:
 P (X) Change () Addition

 Name:
 HENSLEY, GARY
 Name:
 VANORSDALE, CHARLES R REV.

 Address:
 100 CREEKSIDE APT 198
 Address:
 12105 NEWPORT SOUND PL

 City-St-Zip:
 NEW SMYRNA BEACH, FL 32168
 City-St-Zip:
 NEW SMYRNA BEACH, FL 32168 US

Title: () Delete Title: (X) Change () Addition VANORSDALE, JOAN E Name: VANORSDALE, JOAN E SEC/TRE Name: Address: 12105 NEWPORT SOUND PL Address: 12105 NEWPORT SOUND PL City-St-Zip: NEW SMYRNA BEACH, FL 32168 City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

 Title:
 P () Delete
 Title:
 D (X) Change () Addition

 Name:
 VANORSDALE, CHARLES R
 Name:
 MUELLER, BERNHARD K TRUSTEE

 Address:
 12105 NEWPORT SOUND PL
 Address:
 907 LAKE AVENUE

City-St-Zip: NEW SMYRNA BEACH, FL 32168 US City-St-Zip: EDGEWATER, FL 32132 US

Title: D () Delete Title: () Change () Addition

 Name:
 FUTCH, ARCHIE
 Name:

 Address:
 402 WARD DR
 Address:

 City-St-Zip:
 OAK HILL, FL 32759 US
 City-St-Zip:

Title: () Delete Title: D () Change (X) Addition
Name: Name: OGLESBY, ROBERT TRUSTEE

Address: Address: 445 PERDITA

City-St-Zip: City-St-Zip: EDGEWATER, FL 32132 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: CHARLES R VANORSDALE REV. 02/25/2009