

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90104 046 ****61.25

DOCUMENT # 735551 1. Entity Name THE KINGDOM OF THE SUN CHAPTER, INC.					
Principal Place of Business CENTRAL FL COMM COLLEGE BLDG 41, ROOM 212 OCALA, FL 34474 US			Mailing Address P O BOX 114 OCALA, FL 34478-0114 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01112007 Chg-NP CR2E037 (12/06)	
4. FEI Number 59-1670649				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SCHROCK, ARTHUR C 10010 SW 74TH TERR OCALA, FL 34476-3839			7. Name and Address of New Registered Agent Name Donald Dertien Street Address (P.O. Box Number is Not Acceptable) 9631 S.W. 90TH ST. City OCALA FL Zip Code 34481		
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 <u>Donald Dertien</u> <i>Donald Dertien</i> 2/1/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T SCHROCK, ARTHUR C 10010 SW 74TH TERR OCALA, FL 344763839	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ARTHUR C. SCHROCK 10010 SW 74TH TERR OCALA, FL 344763839	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P KUNZE, ELTON C 11362 SW 77TH AVE OCALA, FL 344764122	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PAST PRES. KUNZE, ELTON C 11362 SW 77TH AVE OCALA, FL 344764122	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V BURNER, JACK P 5016 SW 31ST ST OCALA, FL 344744335	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	XV HORNE, FLOYD D. 9435 SE 134 ST SUMMERFIELD, FL 34491-9445	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V HAPGOOD, EDWIN P 9855 SW 203RD CIRCLE DUNNELLON, FL 344315941	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T DONALD DERTIEN 9631 SW 90TH ST. OCALA, FL 34481-	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S POWERS, LOIS 9735 SW 92ND CT, UNIT C OCALA, FL 344818635	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P. KENDALL MEINTYRE 1272 BLEASE LOOP THE VILLAGES, FL 32162	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BRUNSTROM, ALAN L 5925 SE 158TH COURT OCKLAWAHA, FL 321792945	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LAURENCE T. FUREY 18293 SW 75th LOOP DUNNECON, FL 34432-2528	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 either like empowered.					
SIGNATURE: <u>Donald Dertien</u> <i>Donald Dertien</i> 2/1/07 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
352237 0656 <small>Daytime Phone #</small>					