

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004819

FILED
Apr 27, 2009
Secretary of State

Entity Name: QUEEN OF ALL SAINTS CHAPEL, INC.

Current Principal Place of Business:

20120 BARNETT ROAD
BROOKSVILLE, FL 34601

New Principal Place of Business:

Current Mailing Address:

20120 BARNETT ROAD
BROOKSVILLE, FL 34601

New Mailing Address:

1000 SPRING LAKE HIGHWAY
BROOKSVILLE, FL 34602

FEI Number: 38-2906814

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SELWAY, JOSEPH REV
20120 BARNETT ROAD
BROOKSVILLE, FL 34601 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: CP () Delete
Name: SANBORN, DONALD J
Address: 20120 BARNETT ROAD
City-St-Zip: BROOKSVILLE, FL 34601

Title: VP () Delete
Name: SELWAY, JOSEPH S
Address: 20120 BARNETT ROAD
City-St-Zip: BROOKSVILLE, FL 34601

Title: S () Delete
Name: SELWAY, JOSEPH
Address: 20120 BARNETT ROAD
City-St-Zip: BROOKSVILLE, FL 34601

Title: T () Delete
Name: SANBORN, DONALD
Address: 20120 BARNETT ROAD
City-St-Zip: BROOKSVILLE,, FL 34601

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: SANBORN, DONALD J
Address: 1000 SPRING LAKE HIGHWAY
City-St-Zip: BROOKSVILLE, FL 34602

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

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

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

Title: D () Change (X) Addition
Name: DESPÓSITO, NICOLÁS
Address: 1000 SPRING LAKE HIGHWAY
City-St-Zip: BROOKSVILLE, FL 34602

Title: D () Change (X) Addition
Name: PALMA, FEDERICO
Address: 1000 SPRING LAKE HIGHWAY
City-St-Zip: BROOKSVILLE, FL 34602

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: DONALD J SANBORN

PRES

04/27/2009

Electronic Signature of Signing Officer or Director

_____ Date