

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002384

FILED
Feb 20, 2011
Secretary of State

Entity Name: INTERNATIONAL FELLOWSHIP OF CHAPLAINS, INC.

Current Principal Place of Business:

3290 N. MICHIGAN AVE.
SAGINAW, MI 48603

New Principal Place of Business:

3290 N. MICHIGAN AVE.
SAGINAW, MI 48604

Current Mailing Address:

PO BOX 5922
SAGINAW, MI 48603

New Mailing Address:

FEI Number: 38-3446353 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ALEXANDER, ROGER
1534 STAFFORD AVE
MERRITT ISLAND, FL 32952 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: DR
Name: VORCE, DAVID
Address: 3290 N MICHIGAN
City-St-Zip: SAGINAW, MI 48604

Title: VP
Name: VORCE, JUDITH
Address: 3290 N. MICHIGAN AVE.
City-St-Zip: SAGINAW, MI 48604

Title: DR
Name: MORRIS, TERRY
Address: 3200 KERN RD.
City-St-Zip: LAKE ORION, MI 48360

Title: DR
Name: SCHWEIGERT, THOMAS
Address: 4388 LAMSON DR
City-St-Zip: WATERFORD, MI 48329

Title: D
Name: MORRIS, PATRICIA C.
Address: 3200 KERN RD
City-St-Zip: LAKE ORION, MI 48360

Title: D
Name: DIGIROLAMO, WENDY
Address: 1604 ADELAIDE.
City-St-Zip: MIDLAND, MI 48640

I hereby 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 all other like empowered.

SIGNATURE: JUDITH VORCE

VP

02/20/2011

Electronic Signature of Signing Officer or Director

Date