2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# N00000002963

Entity Name: THE CHRYSALIS COMMUNITY FOUNDATION, INC.

Current Principal Place of Business:

42 SOUTH PENINSULA DRIVE
DAYTONA BEACH, FL 32118

New Principal Place of Business:

Current Mailing Address:

186 LAURELWOOD LANE
% BARBARA MULLENS
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 59-3647420 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOLERJACK, DANIEL J
42 SOUTH PENINSULA DRIVE
DAYTONA BEACH, FL 32118 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: PD ( ) Delete
Name: GORDON, FRAN
Address: 465 CHELSEA PLACE AVENUE
City-St-Zip: ORMOND BEACH, FL 32174

Title: STD ( ) Delete
Name: MULLENS, BARBARA A
Address: 186 LAURELWOOD LN.
City-St-Zip: ORMOND BEACH, FL 32174

Title: D ( ) Delete
Name: CHANTRAU, DIANE
Address: 55 RIVER RIDGE TRAIL
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: BARBARA A. MULLENS STD 04/07/2009
Electronic Signature of Signing Officer or Director — Date