## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000003613

Entity Name: CHAPLAIN SERVICES, INC.

FILED Apr 26, 2006 Secretary of State

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

39520 GRAYS AIRPORT ROAD LADY LAKES, FL 32158

**Current Mailing Address: New Mailing Address:** 

PO BOX 1538 LADY LAKE, FL 32158

FEI Number: 59-2766052 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HOWARD, R. DENNIS 39520 GRAYS AIRPORT ROAD LADY LAKES, FL 32158

**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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete HOWARD, R. DENNIS Name: 39520 GRAYS AIRPORT ROAD Address:

City-St-Zip: LADY LAKES, FL 32158

Title: () Delete Name: HOWARD, BARBARA G Address: 39520 GRAYS AIRPORT ROAD City-St-Zip: LADY LAKES, FL 32158

Title: DVP () Delete WILLIAMS, BOB Name: Address: P.O. BOX 559

City-St-Zip: WILDWOOD, FL 34785

(X) Change ( ) Addition HOWARD, R. DENNIS Name:

Address: 39520 GRAYS AIRPORT ROAD

City-St-Zip: LADY LAKES, FL 32158

Title: (X) Change ( ) Addition Name: HOWARD, BARBARA G Address: 39520 GRAYS AIRPORT ROAD City-St-Zip: LADY LAKES, FL 32158

Title: (X) Change ( ) Addition

SCROGGIE, JOYCE Name: Address: 4411 SE 107TH LN City-St-Zip: BELLEVIEW, FL 34420

I hereby certify that the information supplied with this filing does not qualify for the 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: R. DENNIS HOWARD DP 04/26/2006