

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000380

FILED
Feb 15, 2011
Secretary of State

Entity Name: THE SEASIDE INTERFAITH CHAPEL, INC.

Current Principal Place of Business:

582 FOREST STREET
SEASIDE, FL 32459

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 4936
SANTA ROSA BEACH, FL 32459

New Mailing Address:

FEI Number: 62-1845745

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIVINGSTON, SUSAN
83 SKY HIGH DUNE DRIVE
SANTA ROSA BEACH, FL 32459 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: D
Name: ROBERTS, PATRICK C
Address: 2111 TWO PONDS LANE
City-St-Zip: TALLAHASSEE, FL 32312

Title: DP
Name: RENFROE, CHARLES
Address: 9 OLD PACES PLACE NW
City-St-Zip: ATLANTA, GA 30327

Title: DS
Name: MOWELL, SARAH
Address: PO BOX 4687
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: DT
Name: JAMES, ED
Address: 5 OLD PACES PL HWY
City-St-Zip: ATLANTA, GA 30327

Title: D
Name: SWARD, CHARLES
Address: 1837 CEDAR CANYON DR
City-St-Zip: ATLANTA, GA 30345

Title: D
Name: GESSLER, MARK
Address: 8008 HACKAMORE DR.
City-St-Zip: POTOMAC, MD 20857

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: CHARLES RENFROE

DP

02/15/2011

Electronic Signature of Signing Officer or Director

Date