

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 17, 2008
Secretary of State**

DOCUMENT# N01000007549

Entity Name: SAMARITAN'S CHAPEL, INC.

Current Principal Place of Business:

504 E. VENICE AVENUE
VENICE, FL 34285

New Principal Place of Business:

1200 OGDEN ROAD
3
VENICE, FL 34285

Current Mailing Address:

504 E. VENICE AVENUE
VENICE, FL 34285

New Mailing Address:

1200 OGDEN ROAD
3
VENICE, FL 34285

FEI Number: 65-1149584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PREECE, ERIN L D
2192 MESIC HAMMOCK WAY
VENICE, FL 34292 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 () Delete
Name: MOGFORD, EDMOND JR.
Address: 613 GRANDA AVE
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: MOGFORD, ERIN L D
Address: 613 GRANADA AVE
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: PARROTT, LAWRENCE D
Address: 1225 EAST GATE DR.
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: EYLER, FAYE D
Address: 609 CAREFREE
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: HERRERA, LINDA D
Address: 1037 US 41 BYPASS S
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: HODGE, THOMAS D
Address: 312 W MIAMI AVE
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: PREECE, ERIN L D
Address: 2192 MESIC HAMMOCK WAY
City-St-Zip: VENICE, FL 34292

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: () 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: ERIN PREECE

D

01/17/2008

Electronic Signature of Signing Officer or Director

Date