

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000009928

**FILED**  
**Apr 23, 2011**  
**Secretary of State**

**Entity Name:** CHAPMAN FAMILY MINISTRIES, INC.

**Current Principal Place of Business:**

3682 AIRPORT ROAD  
CRESTVIEW, FL 32539

**New Principal Place of Business:**

**Current Mailing Address:**

3682 AIRPORT ROAD  
CRESTVIEW, FL 32539

**New Mailing Address:**

**FEI Number:** 20-1300902

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHAPMAN, CHARLES T III  
3682 AIRPORT ROAD  
CRESTVIEW, FL 32539 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:** P  
**Name:** CHAPMAN, CHARLES T III  
**Address:** 3682 AIRPORT ROAD  
**City-St-Zip:** CRESTVIEW, FL 32539

**Title:** VP  
**Name:** CHAPMAN, HAYWARD T  
**Address:** 3505 HORNE HOLLOW ROAD  
**City-St-Zip:** CRESTVIEW, FL 32539

**Title:** ST  
**Name:** CHAPMAN, JANE D  
**Address:** 3505 HORNE HOLLOW ROAD  
**City-St-Zip:** CRESTVIEW, FL 32539

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 T. CHAPMAN III

PRES

04/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date