## 2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000003361

FILED Jun 15, 2006 Secretary of State

Entity Name: CHAPLAINS IN THE HANDS OF GOD, INC.

**Current Principal Place of Business:** 

**New Principal Place of Business:** 

4002 W. WATERS AVE. TAMPA, FL 33614

**Current Mailing Address:** 

**New Mailing Address:** 

9901 TATE LN. TAMPA, FL 33626 11305 MALLORY SQUARE DR. #103

TAMPA, FL 33635

FEI Number: 01-0811304

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:

RAMIREZ, RAYMOND REV 9901 TATÉ LN. TAMPA, FL 33626 US

MARTINEZ, GLORIA REV 11305 MALLORY SQUARE DR.

#103

TAMPA, FL 33635 US

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: GLORIA MARTINEZ

06/15/2006

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete MARTINEZ, GLORIA REV Name: 4002 W WATERS AVE STE 2 Address:

City-St-Zip: TAMPA, FL 33614

Title: PD () Delete RAMIREZ, RAYMOND REV

Name: Address: 9901 TATE LN. City-St-Zip: TAMPA, FL 33626

Title: ( ) Delete RAMIREZ, GLORYBELL MIS Name:

Address: 9901 TATE LN. City-St-Zip: TAMPA, FL 33626

(X) Change ( ) Addition MARTINEZ, GLORIA REV Name: Address: 4002 W WATERS AVE STE 2

City-St-Zip: TAMPA, FL 33614

Title: (X) Change ( ) Addition

Name: FUENTES, SARAH MIS Address: 8837 BRENNAN CR. #102 City-St-Zip: TAMPA, FL 33615

Title: (X) Change ( ) Addition

Name: CURZON, ADELA MIS Address: 12311 WHITE RIDGE DR. City-St-Zip: TAMPA, FL 33624

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: GLORIA MARTINEZ **REV** 06/15/2006