2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# N04000008510

Entity Name: CHASAH MINISTRIES INC.

Current Principal Place of Business:

27748 SORA BLVD
WESLEY CHAPEL, FL 33544 US

New Principal Place of Business:

Current Mailing Address:

27748 SORA BLVD
WESLEY CHAPEL, FL 33544 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SIEBEL, MARCELLA I
27748 SORA BLVD
WESLEY CHAPEL, FL 33544 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: PRES ( ) Delete
Name: SIEBEL, MARCELLA I
Address: 27748 SORA BLVD
City-St-Zip: WESLEY CHAPEL, FL 33544 US

Title: VP ( ) Delete
Name: SIEBEL, JERRY D DR.
Address: 27748 SORA BLVD
City-St-Zip: WESLEY CHAPEL, FL 33544 US

Title: SEC ( ) Delete
Name: RIGGS, MARGARET L
Address: 2844 TANGLEWOOD
City-St-Zip: WESLEY CHAPEL, FL 33543 US

Title: BD ( ) Delete
Name: VALDEZ, H. R DR.
Address: 3006 LAKE ELLEN DR.
City-St-Zip: TAMPA, FL 33618 US

Title: BD ( ) Delete
Name: VALDEZ, CYNTHIA L
Address: 3006 LAKE ELLEN DR.
City-St-Zip: TAMPA, FL 33618 US

Title: BD ( ) Delete
Name: POVOLNY, PATRICIA
Address: 19219 FISHERMANS BEND DRIVE
City-St-Zip: LUTZ, FL 33558 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: MARCELLA I SIEBEL PRES 04/20/2009
Electronic Signature of Signing Officer or Director Date