

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005463

FILED  
Jan 09, 2008  
Secretary of State

Entity Name: CAPE HAZE FELLOWSHIP CHURCH INC.

## Current Principal Place of Business:

3754 CAPE HAZE DRIVE  
ROTONDA WEST, FL 33947 US

## New Principal Place of Business:

## Current Mailing Address:

28 LEEWARD DRIVE  
CAPE HAZE, FL 33946 US

## New Mailing Address:

150 BAY HEIGHTS  
ENGLEWOOD, FL 34103 US

FEI Number: 20-2908407

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HALEY, GERARD  
28 LEEWARD DRIVE  
CAPE HAZE, FL 33946 US

## Name and Address of New Registered Agent:

EFFREM, DEBORAH E  
150 BAY HEIGHTS  
ENGLEWOOD, FL 34103 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: DEBORAH E. EFFREM

01/09/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ANTLE, BRUCE  
Address: 2779A NORTH BEACH RD.  
City-St-Zip: ENGLEWOOD, FL 34223 US

Title: SEC ( ) Delete  
Name: SCHLUEP, CAROL  
Address: 268 ANNAPOLIS LANE  
City-St-Zip: ROTONDA WEST, FL 33947 US

Title: FSEC ( ) Delete  
Name: HALEY, SHIRLEY  
Address: 28 LEEWARD DRIVE  
City-St-Zip: CAPE HAZE, FL 33946 US

Title: TREA ( ) Delete  
Name: HALEY, GERARD  
Address: 28 LEEWARD DRIVE  
City-St-Zip: CAPE HAZE, FL 33946 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ANTLE, BRUCE  
Address: 150 BAY HEIGHTS  
City-St-Zip: ENGLEWOOD, FL 34103 US

Title: VP (X) Change ( ) Addition  
Name: EFFREM, TIMOTHY C  
Address: 150 BAY HEIGHTS  
City-St-Zip: ENGLEWOOD, FL 34103 US

Title: SEC (X) Change ( ) Addition  
Name: EFFREM, DEBORAH E  
Address: 150 BAY HEIGHTS  
City-St-Zip: ENGLEWOOD, FL 34103 US

Title: FSEC (X) Change ( ) Addition  
Name: ZUK, JAMES N  
Address: 150 BAY HEIGHTS  
City-St-Zip: ENGLEWOOD, FL 34103 US

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: BRUCE R. ANTLE

P

01/09/2008

Electronic Signature of Signing Officer or Director

Date