


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 15, 2008 8:00 am**  
**Secretary of State**

02-15-2008 90003 044 \*\*\*\*70.00

<b>DOCUMENT # N06000002772</b> 1. Entity Name <b>CHAPEL HILL BAPTIST CHURCH OF TALLAHASSEE, INC.</b>					
Principal Place of Business <b>102 CHAPEL DRIVE TALLAHASSEE, FL 32304</b>			Mailing Address <b>102 CHAPEL DRIVE TALLAHASSEE, FL 32304</b>		
2. Principal Place of Business - No P.O. Box # <b>224 CHAPEL DRIVE</b> Suite, Apt. #, etc.		3. Mailing Address <b>224 CHAPEL DRIVE</b> Suite, Apt. #, etc.			
City & State <b>TALLAHASSEE, FL</b> Zip <b>32304</b>		City & State <b>TALLAHASSEE, FLORIDA</b> Zip <b>32304</b>		4. FEI Number <b>20-4485273</b>	
Country <b>USA</b>		Country <b>USA</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				02082008 Chg-NP CR2E037 (12/06)	
6. Name and Address of Current Registered Agent  <b>MEGGS, WILLIAM N 3650 FLAT ROAD TALLAHASSEE, FL 32303</b>			7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D BROWN, LAVERNE 5785 CHARLES SAMUEL DRIVE TALLAHASSEE, FL 32309</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D GRIFFIN, JOSEPH M 1243 E WINDWOOD WAY TALLAHASSEE, FL 32311</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D WHITLEY, CARL J 3974 TERIDAN WAY TALLAHASSEE, FL 32303</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>STD HARRELL, ROBERT 7765 HAVANA HIGHWAY HAVANA, FL 32333</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD MEGGS, WILLIAM N 3650 FLAT ROAD TALLAHASSEE, FL 32303</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE: <u>Robert C Harrell</u> <u>Feb 13, 2008</u> <u>850-222-6908</u></b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					