


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2008 08:00 AM
Secretary of State

DOCUMENT # N06000009438 1. Entity Name SPIRITUALIST CHAPEL OF MELBOURNE, INC.	
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Principal Place of Business 588 WAVESIDE DRIVE MELBOURNE, FL 32934	Mailing Address 588 WAVESIDE DRIVE MELBOURNE, FL 32934
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DO NOT WRITE IN THIS SPACE



01302008 No Chg-NP CR2E037 (4/06)

4. FEI Number 11-3793179	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROGERS, JOHN J REV.
 588 WAVESIDE DRIVE
 MELBOURNE, FL 32934

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MATTFELD, PAUL A 429 PAPAYA CIRCLE BAREFOOT BAY, FL 32976
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PRICE, LOIS L 1265 PINWOOD DRIVE MELBOURNE, FL 32938
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD QUINN, PATRICIA A 588 WAVESIDE DRIVE MELBOURNE, FL 32934
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CRUZ, JOAN 560 AVONDALE NE PALM BAY, FL 32907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 03/11/08-80001-020 70.00

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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.

SIGNATURE: Paul A. Mattfeld - Pres 2-23-08 ⁽⁷⁷²⁾ 571-1555
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #