

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011868

FILED
Apr 30, 2009
Secretary of State

Entity Name: GRACE CHAPEL OF TARPON SPRINGS, INC.

Current Principal Place of Business:

1700 KEYSTONE RD.
TARPON SPRINGS, FL 34688

New Principal Place of Business:

1278 NORTH PINELLAS AVE.
TARPON SPRINGS, FL 34689

Current Mailing Address:

1700 KEYSTONE RD.
TARPON SPRINGS, FL 34688

New Mailing Address:

1278 NORTH PINELLAS AVE..
TARPON SPRINGS, FL 34689

FEI Number: 06-1837133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRENCE, ALFRED W JR.
6645 RIDGE RD.
PORT RICHEY, FL 34668 US

Name and Address of New Registered Agent:

TORRENCE, ALFRED W JR.
6709 RIDGE RD.
PORT RICHEY, FL 34668 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:

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: CREAMER, FRANK REV
Address: 1700 KEYSTONE RD
City-St-Zip: TARPON SPRINGS, FL 34688

Title: C () Delete
Name: SCHOLL, JANE
Address: 2803 FOX SQUIRREL DR
City-St-Zip: PALM HARBOR, FL 34684

Title: T () Delete
Name: HENDERSON, VIRGIL T
Address: 35246 US 19 N #209
City-St-Zip: PALM HARBOR, FL 34684

Title: S () Delete
Name: MCKELLER, LARRY
Address: 2108 OTTER CT
City-St-Zip: TARPON SPRINGS, FL 34689

Title: MBR () Delete
Name: BROOKS, TOM
Address: 1810 LEXINGTON PL
City-St-Zip: TARPON SPRINGS, FL 34689

Title: MBR () Delete
Name: KINNEY, BOB
Address: 6325 RIDGETOP DR
City-St-Zip: NEW PORT RICHEY, FL 34655

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: THE REV. FRANK C. CREAMER

CHAI

04/30/2009

Electronic Signature of Signing Officer or Director

Date