

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000780

FILED
Jun 22, 2009
Secretary of State

Entity Name: KEEPERS OF THE CHAPEL, INC.

Current Principal Place of Business:

199 NE RANGE AVE.
MADISON, FL 32340

New Principal Place of Business:

Current Mailing Address:

199 NE RANGE AVE.
MADISON, FL 32340

New Mailing Address:

FEI Number: 06-1835307 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TAIBL, MONICA PL
125 NE RANGE AVE.
MADISON, FL 32340 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: D () Delete
Name: RHOADS, WILLIAM
Address: 2021 QUINN CT.
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: BOOTH, MATTHEW
Address: 405 SW PINCKNEY ST
City-St-Zip: MADISON, FL 32340

Title: D () Delete
Name: DRIGGERS, DAVID
Address: 184 HUNTERS RIDGE RD.
City-St-Zip: MONTICELLO, FL 32344

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MAULTSBY, JOHN P
Address: 139 NE MARION ST
City-St-Zip: MADISON, FL 32340

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: STUBE, KEVIN
Address: 3561 S DAWSON ST
City-St-Zip: AUROA, CO 80014

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: DAVID DRIGGERS

D

06/22/2009

Electronic Signature of Signing Officer or Director

Date