2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004669

Entity Name: CARSON-CHANEY HOUSE, INC

FILED Jun 24, 2009 Secretary of State

Entity Name: CARSON-CHANEY HOUSE, INC.			
Current Principal Place of Business:		New Principal Place of Business:	
401 LAKE O DELAND, F	GERTIE ROAD L 32720		
Current Mailing Address:		New Mailing Address:	
PO BOX 608837 ORLANDO, FL 32860		P.O. BOX 608837 ORLANDO, FL 32860	
FEI Number: FEI Number Applied For (X) FEI Num In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the		nber Not Applicable() he prior notice.	Certificate of Status Desired ()
Name and	Address of Current Registered Agent:	Name and Address of N	lew Registered Agent:
HARRIS, C 12 CHANNI ORLANDO,	NG AVE	HARRIS, CYNTHIA 401 LAKE GERTIE RD DELAND, FL 32720 L	JS
The above in the State	named entity submits this statement for the purpose o of Florida.	f changing its registered o	office or registered agent, or both,
SIGNATURE:			06/24/2009
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	PD () Delete HARRIS, CYNTHIA 12 CHANNING AVE ORLANDO, FL 32811	Title: PD (X Name: HARRIS, CYNT Address: P.O. BOX 6088 City-St-Zip: ORLANDO, FL	337
Title: Name: Address: City-St-Zip:	VPD () Delete FELDER, JOSEPH 5104 N ORANGE BLOSSOM TRAIL #108 ORLANDO, FL 32809	Title: VPD (X Name: HEARD, SHAKI Address: P.O. BOX 6088 City-St-Zip: ORLANDO, FL	337
Title: Name: Address: City-St-Zip:	TD () Delete HEARD, SHAKIRA 12 CHANNING AVE ORLANDO, FL 32811	Title: D (X Name: BRODUS, JADI Address: P.O. BOX 6088 City-St-Zip: ORLANDO, FL	337
Title: Name: Address: City-St-Zip:	D () Delete SOMERS, JENNIFER 2713 SHERINGHAM ROAD ORLANDO, FL 32808	Title: () Name: Address: City-St-Zip:) Change ()Addition
Title: Name: Address: City-St-Zip:	D () Delete WILLIAMS, ANGELA 2713 SHERINGHAM ROAD ORLANDO, FL 32808	Title: () Name: Address: City-St-Zip:) Change ()Addition

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: CYNTHIA HARRIS PD 06/24/2009