

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009273

FILED
Apr 30, 2009
Secretary of State

Entity Name: LAW ENFORCEMENT CHAPLAIN CORPS, INC.

Current Principal Place of Business:

1405 IMPATIENS CT.
TRINITY, FL 34655

New Principal Place of Business:

Current Mailing Address:

1405 IMPATIENS CT.
TRINITY, FL 34655

New Mailing Address:

FEI Number: 80-0272542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISENHART, REID
1405 IMPATIENS CT.
TRINITY, FL 34655 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: PD () Delete
Name: ISENHART, REID
Address: 1405 IMPATIENS CT.
City-St-Zip: TRINITY, FL 34655

Title: VD () Delete
Name: LEWIS, DONALD
Address: 3197 HARVEST MOON DR.
City-St-Zip: PALM HARBOR, FL 34683

Title: D () Delete
Name: SANDOFF, TOM
Address: 3090 LANDMARK BLVD., #1905
City-St-Zip: PALM HARBOR, FL 34684

Title: D () Delete
Name: HILDEBRANDT, DAVID
Address: 150 LISA LANE
City-St-Zip: OLDSMAR, FL 34677

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:

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: REID B. ISENHART

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date