

2006

CORPORATION  
ANNUAL REPORTFILED  
Feb 27, 2006 8:00 am  
Secretary of State

02-27-2006 90081 044 \*\*\*150.00

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1. Entity Name  
PINEWOOD CHAPEL CORPORATIONPrincipal Place of Business  
357 NW WILKS LN SUITE B  
LAKE CITY, FL 32055Mailing Address  
357 NW WILKS LN SUITE B  
LAKE CITY, FL 32055

01252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number  
03-0469877Applied For  
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

MELVIN & ANN BARKER  
178 SW LEATHER CT  
LAKE CITY, FL 32024DO NOT WRITE  
IN THIS SPACE

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$350.009. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE D  
NAME BARKER, MELVIN  
STREET ADDRESS ROUTE 24 BOX 4023, 178 SW LEATHER CT.  
CITY-ST-ZIP LAKE CITY, FL 32024TITLE D  
NAME BARKER, ANN  
STREET ADDRESS 178 SW LEATHER CT  
CITY-ST-ZIP LAKE CITY, FL 32024TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
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CITY-ST-ZIPDO NOT WRITE  
IN THIS SPACE

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 607, 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: Melvin C Barker Melvin C. Barker 02-15-06 386-755-4388

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #