2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2011
Secretary of State

DOCUMENT# N15121

Entity Name: CHAIRES COMMUNITY APOSTOLIC HOLINESS CHURCH, INC.

Current Principal Place of Business:

5755 CHAIRES CROSSROAD
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

5755 CHAIRES CROSSROAD
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 06-1677223 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, FREEMAN JR.
392 ROCK ROAD
CRAWFORDVILLE, FL 32327 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
Name: BROWN, JOSEPH
Address: 2616 MISSION RD. #86
City-St-Zip: TALLAHASSEE, FL 32304

Title: D
Name: HAMMOCK, CASSIE B
Address: 8137 BUCKLAKE RD.
City-St-Zip: TALLAHASSEE, FL 32311

Title: D
Name: BROWN, PATRICIA
Address: 2616 MISSION RD. #86
City-St-Zip: TALLAHASSEE, FL 32304

Title: D
Name: DAVIS, FREEMAN JR.
Address: 392 ROCK RD.
City-St-Zip: CRAWFORDVILLE, FL 32327

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH BROWN D 05/05/2011

Electronic Signature of Signing Officer or Director — Date