

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27674

FILED
Mar 29, 2011
Secretary of State

Entity Name: CHRIST MEMORIAL CHAPEL, INC.

Current Principal Place of Business:

52 S. BEACH RD.
HOBE SOUND, FL 33475

New Principal Place of Business:

Current Mailing Address:

52 S. BEACH RD.
P.O. BOX 582
HOBE SOUND, FL 33475

New Mailing Address:

FEI Number: 59-0882964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAXWELL, LESLIE H
50 SO. BEACH ROAD
HOBE SOUND, FL 33455 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: P
Name: PRIOR, DAVID C.L.
Address: 52 SOUTH BEACH ROAD
City-St-Zip: HOBE SOUND, FL 33455

Title: VP
Name: GALYEAN, GARY
Address: 160 SOUTH BEACH ROAD
City-St-Zip: HOBE SOUND, FL 33455

Title: C
Name: CONRADES, GEORGE
Address: 120 GOMEZ ROAD
City-St-Zip: HOBE SOUND, FL 33455

Title: S
Name: MILLER, KATHERINE
Address: 103 RIVER ROAD
City-St-Zip: HOBE SOUND, FL 33455

Title: T
Name: WILMERDING, DAVID M
Address: 11742 SE FLORIDA AVENUE
City-St-Zip: HOBE SOUND, FL 33455

Title: CFO
Name: TESTA, DAVID
Address: 314 SOUTH BEACH ROAD
City-St-Zip: HOBE SOUND, FL 33455

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: KATHERINE MILLER

S

03/29/2011

Electronic Signature of Signing Officer or Director

Date