

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002315

FILED
Mar 09, 2009
Secretary of State

Entity Name: LAKELAND LAW ENFORCEMENT CHAPLAINCY CORPS, INC.

Current Principal Place of Business:

219 N MASSACHUSETTS AVE
LAKELAND, FL 33801 US

New Principal Place of Business:

Current Mailing Address:

219 N MASSACHUSETTS AVE
LAKELAND, FL 33801 US

New Mailing Address:

FEI Number: 59-3232578

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DORMER, CHARLES
219 N. MASSACHUSETTS AVENUE
LAKELAND, FL 33801 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: VD () Delete
Name: HARVEY, DANIEL
Address: 4818 LEISUREWOOD LANE
City-St-Zip: LAKELAND, FL 33811

Title: D () Delete
Name: STARLING, CAROL ANN M
Address: 6121 CHRISTINA DR W
City-St-Zip: LAKELAND, FL 33813

Title: TD () Delete
Name: DORMER, CHARLES
Address: 219 N MASSACHUSETTS AVE
City-St-Zip: LAKELAND, FL

Title: PD () Delete
Name: SIEGEL, ROBERT G
Address: 8805 TOM COSTRINE ROAD
City-St-Zip: LAKELAND, FL 33809

Title: D () Delete
Name: KERSEY, MARILYN
Address: 615 PALMORE COURT
City-St-Zip: LAKELAND, FL 33813

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:

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: CHARLES DORMER

TD

03/09/2009

Electronic Signature of Signing Officer or Director

Date