

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003798

FILED  
Apr 03, 2008  
Secretary of State

Entity Name: SEMINOLE COMMUNITY CHAPEL, INC.

## Current Principal Place of Business:

10721 61ST AVE NORTH  
SEMINOLE, FL 33772 US

## New Principal Place of Business:

## Current Mailing Address:

10721 61ST AVE NORTH  
SEMINOLE, FL 33772 US

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOWARD, PASTOR GENE  
10719 61ST AVE N  
SEMINOLE, FL 33772 US

## Name and Address of New Registered Agent:

HOWARD, ALVIN E PASTOR  
10719 61ST AVE N  
SEMINOLE, FL 33772 US

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: ALVIN HOWARD

04/03/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HOWARD, GENE  
Address: 10719 61ST AVE N  
City-St-Zip: SEMINOLE, FL 33772

Title: D ( ) Delete  
Name: AUREDICK, TOM  
Address: C/O 10719 61ST AVE N  
City-St-Zip: SEMINOLE, FL 33772

Title: D ( ) Delete  
Name: ROSE, IVAN  
Address: C/O 10719 61ST AVE N  
City-St-Zip: SEMINOLE, FL 33772

Title: D (X) Delete  
Name: HUTCHINSON, CHARLES  
Address: 10721 61ST AVE N  
City-St-Zip: SEMINOLE, FL 33772

Title: D (X) Delete  
Name: FARRAR, TOM  
Address: 10721 61ST AVE N  
City-St-Zip: SEMINOLE, FL 33772

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: HOWARD, ALVIN  
Address: 10719 61ST AVE N  
City-St-Zip: SEMINOLE, FL 33772

Title: D (X) Change ( ) Addition  
Name: FARRAR, TOM  
Address: C/O 10719 61ST. AVE N  
City-St-Zip: SEMINOLE, FL 33772

Title: D (X) Change ( ) Addition  
Name: SHRIVE, JOHN  
Address: C/O 10719 61ST AVE N  
City-St-Zip: SEMINOLE, FL 33772

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: ALVIN E. HOWARD

D

04/03/2008

Electronic Signature of Signing Officer or Director

Date