

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004418

FILED  
Mar 09, 2006  
Secretary of State

**Entity Name:** THE ALLIANCE CHAPEL OF DELAND, INC. OF THE CHRISTIAN AND MISSIONARY ALLIANCE

**Current Principal Place of Business:**

600 S. FLORIDA AVENUE  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

600 S. FLORIDA AVENUE  
DELAND, FL 32720

**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:**

ANDERSON, DON E REV  
816 BENTON LAKE DRIVE S  
DELAND, FL 32724 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: PD ( ) Delete  
Name: ANDERSON, DON E  
Address: 816 BENTON LAKE DRIVE S  
City-St-Zip: DELAND, FL 32724

Title: VCD ( ) Delete  
Name: ANDERSON, WILLIAM A  
Address: 600 S FLORIDA AVE  
City-St-Zip: DELAND, FL 32720

Title: SD ( ) Delete  
Name: HOUCK, BURTON  
Address: 600B ALLIANCE COURT  
City-St-Zip: DELAND, FL 32720

Title: TD ( ) Delete  
Name: BOWER, MARY  
Address: 226 BARDEN DRIVE  
City-St-Zip: DELAND, FL 32720

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: DON E. ANDERSON

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

REV.

03/09/2006

\_\_\_\_\_ Date