2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004418

Jun 13, 2007 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

600 S. FLORIDA AVENUE DELAND, FL 32720

Current Mailing Address: New Mailing Address:

600 S. FLORIDA AVENUE DELAND, FL 32720

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ANDERSON, DON E REV
816 BENTON LAKE DRIVE S
DELAND, FL 32724 US

ANDERSON, DON E REV
202 W. WINNEMISSETT AVE
DELAND, FL 32720 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: 06/13/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: ANDERSON, DON E Name: ANDERSON, DON E

ANDERSON, DON E Name. ANDERSON, DON E
Address: 816 BENTON LAKE DRIVE S Address: 202 W. WINNEMISSETT AVE

City-St-Zip: DELAND, FL 32724 City-St-Zip: DELAND, FL 32720

Title: VCD () Delete Title: () Change () Addition

 Name:
 ANDERSON, WILLIAM A
 Name:

 Address:
 600 S FLORIDA AVE
 Address:

 City-St-Zip:
 DELAND, FL 32720
 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 HOUCK, BURTON
 Name:
 MCCARTNEY, ARLENE

 Address:
 600B ALLIANCE COURT
 Address:
 707 S. FLORIDA AVE

 City-St-Zip:
 DELAND, FL 32720
 City-St-Zip:
 DELAND, FL 32720

Title: TD () Delete Title: () Change () Addition

 Name:
 BOWER, MARY
 Name:

 Address:
 226 BARDEN DRIVE
 Address:

 City-St-Zip:
 DELAND, FL 32720
 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: DON E. ANDERSON REV. 06/13/2007