

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000004418

**FILED**  
**Feb 17, 2011**  
**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  
202 W. WINNEMISSETT AVE  
DELAND, FL 32720 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  
Name: ANDERSON, DON E  
Address: 202 W. WINNEMISSETT AVE  
City-St-Zip: DELAND, FL 32720

Title: VCD  
Name: MCGARVEY, GERALD E  
Address: 706 S. SANS SOUCI AVE  
City-St-Zip: DELAND, FL 32720

Title: SD  
Name: MCCARTNEY, ARLENE  
Address: 707 S. FLORIDA AVE  
City-St-Zip: DELAND, FL 32720

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

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: DON E. ANDERSON

PD

02/17/2011

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

\_\_\_\_\_  
Date