

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006266

FILED
Jan 27, 2009
Secretary of State

Entity Name: FRIENDS OF CHAPMAN FIELD, INC.

Current Principal Place of Business:

12401 SOUTH DIXIE HIGHWAY
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

12401 SOUTH DIXIE HIGHWAY
MIAMI, FL 33156

New Mailing Address:

FEI Number: 65-0560090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOOLEY, BOBBE W
12401 SOUTH DIXIE HIGHWAY
MIAMI, FL 33156 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: DEMOTT, JOHN C
Address: 18455 SW S64TH ST
City-St-Zip: HOMESTEAD, FL 33031

Title: SD () Delete
Name: DOOLEY, BOBBE W.
Address: 12401 SOUTH DIXIE HIGHWAY
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: CAMPBELL, RICHARD PH D
Address: 11935 OLD CUTLER ROAD
City-St-Zip: MIAMI, FL

Title: CPD () Delete
Name: PEARSON, STEPHEN D
Address: 13444 SW 83 AVE.
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: CRANE, JONATHON
Address: 18905 SW 280 ST
City-St-Zip: HOMESTEAD, FL 33031

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: BOBBE W. DOOLEY

SD

01/27/2009

Electronic Signature of Signing Officer or Director

Date