2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002270

Entity Name: FALLING CREEK CHAPEL, INC.

FILED Apr 27, 2009 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business |
|--------------------------------------|---------------------------------|
| | |

1290 NW FALLING CREEK RD LAKE CITY, FL 32055 US

Current Mailing Address: New Mailing Address:

PO BOX 3715

LAKE CITY, FL 320563715 US

FEI Number: 59-3317105 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MOORE, ESTHER 1051 NW MOORE FARMS RD LAKE CITY, FL 32055 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: P/D (X) Change () Addition Name: PINGER, CHERYL Name: PINGEL, CHERYL R

Address: 1059 E US 90 Address: 1059 E US 90

City-St-Zip: MACCLENNY, FL 32063 City-St-Zip: MACCLENNY, FL 32063 US

Title: Title: (X) Change () Addition () Delete FRALICK, J S TED Name: MOORE, KENNETH (KENNY F Name: Address: 4548 126TH PLACE A Address: 290 NW MAXMORE DR City-St-Zip: WELLBORN, FL 32094 City-St-Zip: FL, FL 32055 US

 $\label{eq:title:sde} \mbox{Title:} \qquad \mbox{SD} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{S/D} \qquad \mbox{(X) Change () Addition}$

Name: VILLARREAL, MELODY Name: SWART, GAIL

 Address:
 397 NW FLAMINGO GLN
 Address:
 768 NW MANSFIELD DR

 City-St-Zip:
 LAKE CITY, FL 32055
 City-St-Zip:
 WHITE SPRINGS, FL 32096 US

Title: TD () Delete Title: VP/D (X) Change () Addition Name: MOORE, F K KENNY Name: MOORE, ELIZABETH A

 Address:
 390 NW MAXMORE ROAD
 Address:
 290 NW MAXMORE ROAD

 City-St-Zip:
 LAKE CITY, FL 32055
 City-St-Zip:
 LAKE CITY, FL 32055

Name: MOORE, DEWAYNE Name: MOORE, DWAYNE

Address: 1835 NW MOORE FARMS ROAD Address: 1835 NW MOORE FARMS ROAD
City-St-Zip: LAKE CITY, FL 32055 US

Title: VPD () Delete Title: D (X) Change () Addition Name: MOORE, RUTH Name: MOORE, DWIGHT

 Address:
 1835 NW MOORE FARMS ROAD
 Address:
 1835 NW MOORE FARMS ROAD

 City-St-Zip:
 LAKE CITY, FL 32055
 City-St-Zip:
 LAKE CITY, FL 32055 US

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: ELIZABETH A. MOORE VP/D 04/27/2009

Electronic Signature of Signing Officer or Director

Date