

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # N97000000826

1. Entity Name
HARBOUR ISLAND COMMUNITY CHAPEL, INC.



Principal Place of Business
**2046 N.E. 155TH STREET
N. MIAMI BEACH, FL 33162**

Mailing Address
**2046 N.E. 155TH STREET
N. MIAMI BEACH, FL 33162**

DO NOT WRITE IN THIS SPACE



04092006 No'Chg-NP CR2E037 (11/05)

4. FEI Number
65-0728863

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**NELSON, RICHARD
2046 N.E. 155TH STREET
N. MIAMI BEACH, FL 33162**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
NELSON, RICHARD
2046 N.E. 155TH ST
N. MIAMI BEACH, FL 33162**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SATCHELL, MARK
443 HENDRICKS DR
FT LAUDERDALE, FL 33301**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GOLDING, STEVE
1475 W CYPRESS RD
FT LAUDERDALE, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000505134
04/26/06-80106-005 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD NELSON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/06

Date

Daytime Phone #