

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 09, 2003 8:00 am
Secretary of State

04-09-2003 90196 039 ****61.25

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**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

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**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 title if applicable.

(NOTE: Registered Agent signature required when substituting)

DATE

FILE NOW FEE IS \$81.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

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

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

TITLE ☐ Delete
NAME **D GOLDING, STEVE**
STREET ADDRESS **1476 W CYPRESS RD**
CITY-ST-ZIP **FT LAUDERDALE, FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/2003

Date

Daytime Phone #

CR2037 (10/02)