

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

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

**DOCUMENT # N98000002792**

1. Entity Name  
**COMMUNITY CHAPEL OF FLORIDA, INC.**



Principal Place of Business  
**2046 NE 155TH STREET  
NORTH MIAMI BEACH, FL 33162**

Mailing Address  
**2046 NE 155TH STREET  
NORTH MIAMI BEACH, FL 33162**

**DO NOT WRITE IN THIS SPACE**



04092006 No Chg-NP CR2E037 (11/05)

4. FEI Number  
**65-0838755**

Applied For  
☐ Not Applicable

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

**6. Name and Address of Current Registered Agent**

**NELSON, RICHARD  
2034 NE 155TH ST  
NORTH 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 title if applicable.

(NOTE: Registered Agent signature required when resigning)

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	D
NAME	NELSON, RICHARD
STREET ADDRESS	2046 NE 155 TH STREET
CITY- ST- ZIP	NORTH MIAMI BEACH, FL 33162
TITLE	D
NAME	GOLDING, STEVE
STREET ADDRESS	1475 WEST CYPRESS ROAD
CITY- ST- ZIP	FORT LAUDERDALE, FL 33309
TITLE	D
NAME	SATCHELL, MARK
STREET ADDRESS	443 HENDRICKS DRIVE
CITY- ST- ZIP	FORT LAUDERDALE, FL 33301
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

U00000505485  
04/26/06-80116-023 61.25

**DO NOT WRITE  
IN THIS SPACE**

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 #