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Secretary of State

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0020455

NONPROFIT
 CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N98000004161

1. Corporation Name
CHAPEL FOUNDATION OF IRCC, INC

Principal Place of Business
**6205 MURRELL RD
 MELBOURNE FL 32940**

Mailing Address
**6205 MURRELL RD
 MELBOURNE FL 32940**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 1936 Freedom Drive		26 1936 Freedom Drive		07/16/1998	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-3545204	
City & State		City & State		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23 Melbourne FL		28 Melbourne FL		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip Country		Zip Country			
24 32940 25 USA		29 32940 30 USA			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
FERGUSON, JAMES E 6205 MURRELL RD MELBOURNE FL 32940				81 Name			
				Waybright, Cynthia A.			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 1936 Freedom Drive			
				City Melbourne		FL 85 32940	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Cynthia A. Waybright* SECRETARY-TREASURER 4/29/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERFUSON, JAMES E	1.2 NAME	
STREET ADDRESS	6205 MURRELL RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL 32940	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	S/T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WAYBRIGHT, CYNTHIA A	2.2 NAME	Waybright, Cynthia A.
STREET ADDRESS	6205 MURRELL RD	2.3 STREET ADDRESS	2642 Shell Wood Drive
CITY-ST-ZIP	MELBOURNE FL 32940	2.4 CITY-ST-ZIP	Melbourne FL 32934
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLAKE, TOM	3.2 NAME	
STREET ADDRESS	6205 MURRELL RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL 32940	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Cynthia A. Waybright* 4/29/99 (407) 255-6000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)

N9800000462

53225190/29.19

Please note the attached list of Directors
and President

D
Frank Keith
1348 Pilgrim
Melbourne FL 32940

D
Charlie Daniel
1573 Freedom Drive
Melbourne FL 32940

D
Elvin McAlister
1717 Freedom Drive
Melbourne FL 32940

D
Louise Bottomley
1663 Independence Ave.
Melbourne FL 32940

D
John Moale
1640 Old Glory Blvd.
Melbourne FL 32940

D
Dick Leisy
1591 Independence Ave.
Melbourne FL 32940

D
Ginny Poole
1170 Mayflower Ave.
Melbourne FL 32940

D
Jim Peterman
2106 Durban Court
Viera FL 32940

P
Edwin Alexander
1508 Independence
Melbourne FL 32940

D
Wendell Parker
1084 Ironsides Ave.
Melbourne FL 32940