

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

**FILED**  
**Mar 20, 2003 8:00 am**  
**Secretary of State**

03-20-2003 90165 012 \*\*\*\*70.00

**DOCUMENT # N98000004161**

1. Entity Name  
**CHAPEL FOUNDATION OF IRCC, INC**



Principal Place of Business  
**1936 FREEDOM DRIVE  
MELBOURNE FL 32940**

Mailing Address  
**1936 FREEDOM DRIVE  
MELBOURNE FL 32940**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3545204**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**WAYBRIGHT, CYNTHIA A  
1936 FREEDOM DRIVE  
MELBOURNE FL 32940**

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 *Cynthia A. Waybright*  
Signature, typed or printed name of registered agent or trustee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW - FEE IS \$61.25**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
<input checked="" type="checkbox"/> Delete	<b>D</b>	<b>MOALE, JOHN</b>	<b>1640 OLD GLORY BLVD MELBOURNE FL 32940</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Delete	<b>ST</b>	<b>WAYBRIGHT, CYNTHIA A</b>	<b>2642 SHELL WOOD DRIVE MELBOURNE FL 32934</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Delete	<b>P</b>	<b>ALEXANDER, EDWIN</b>	<b>1508 INDEPENDENCE MELBOURNE FL 32940</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> Delete	<b>D</b>	<b>PARKER, WENDELL</b>	<b>1084 IRONSIDES AVE. MELBOURNE FL 32940</b>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Delete	<b>D</b>	<b>BOTTOMLEY, LOUISE</b>	<b>1683 INDEPENDENCE AVE MELBOURNE FL 32940</b>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Delete	<b>D</b>	<b>LEISY, DICK C</b>	<b>1591 INDEPENDENCE AVE MELBOURNE FL 32940</b>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<b>D</b>	<b>Abramowitz, Ben</b>	<b>1532 Tippicanoe Ct. Melbourne, FL 3294400</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<b>D</b>	<b>Breitenstein, Arlan</b>	<b>1025 Mayflower Ave Melbourne, FL 32940</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<b>D</b>	<b>DeNuccio, William</b>	<b>1133 Continental Ave. Melbourne, FL 32940</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Cynthia A. Waybright*  
Cynthia A. Waybright  
Secretary / Treasurer 3/18/03 (321) 255-6000

CR2E037 (10/02)