

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000009224

Entity Name: THE COMMUNITY CHAPEL, INC.**Current Principal Place of Business:**6435 92ND PL. N. UNIT 903
PINELLAS PARK, FL 33782**Current Mailing Address:**PO BOX 47281
ST. PETERSBURG, FL 33743 US**FEI Number: 81-3733155****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SARLO, RICHARD J II
6435 92ND PL. N. UNIT 903
PINELLAS PARK, FL 33782 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PD
Name	SARLO, RICHARD J II
Address	6435 92ND PLACE N. UNIT 903
City-State-Zip:	PINELLAS PARK FL 33782

Title	OTHER, SECRETARY/TREASURER
Name	MEISTER, GARY
Address	6650 STEWART AVE. N UNIT 25
City-State-Zip:	ST. PETERSBURG FL 33702

Title	TRUSTEE
Name	MARKUSSEN, SHAWN
Address	2385 HAWTHORNE DR.
City-State-Zip:	CLEARWATER FL 33763

Title	VP
Name	MCKINLEY, ROCKY
Address	25153 SW 20TH AVE.
City-State-Zip:	NEWBERRY FL 32669

Title	TRUSTEE
Name	CECERE, JEREMY
Address	14099 S. BELCHER RD 1127
City-State-Zip:	LARGO FL 33771

Title	TRUSTEE
Name	PURCELL, CRAIG
Address	1327 55TH AVE. N
City-State-Zip:	ST. PETERSBURG FL 33703

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: RICHARD J SARLO II**PD****04/30/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date