

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000001011

**Entity Name:** THE CHAPEL - OCALA, INC.

**Current Principal Place of Business:**

5 LAKESIDE DR  
OCALA, FL 34482

**FILED**  
**Aug 19, 2019**  
**Secretary of State**  
**5813317697CC**

**Current Mailing Address:**

5 LAKESIDE DR  
OCALA, FL 34482 US

**FEI Number: 82-3995292**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CANNATA, JOHN  
5 LAKESIDE DR  
OCALA, FL 34482 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 P  
Name CANNATA, JOHN  
Address 5 LAKESIDE DR  
City-State-Zip: OCALA FL 34482

Title VP  
Name CANNATA, JENNIFER  
Address 5 LAKESIDE DR  
City-State-Zip: OCALA FL 34482

Title S  
Name SPOSATO, MIKE  
Address 489 LUAKINI ST.  
City-State-Zip: HONOLULU HI 96817

Title T  
Name KIGHT, LAYNA  
Address 6421 NW 12TH ST.  
City-State-Zip: OCALA FL 34482

Title D  
Name KIGHT, HOBY  
Address 6421 NW 12TH ST.  
City-State-Zip: OCALA FL 34482

*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: JOHN CANNATA**

**PRESIDENT**

**08/19/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date