

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 709978**

1. Entity Name

CALVARY ASSEMBLY OF GOD CHURCH, INC.**FILED**
May 01, 2001 8:00 am
Secretary of State

05-01-2001 90034 010 *****61.25

0067572

Principal Place of Business

**3800 RECKER HIGHWAY
WINTER HAVEN FL 33880**

Mailing Address

**3800 RECKER HIGHWAY
WINTER HAVEN FL 33880**

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

59-1658474

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ROGERS, CLIFFORD
45 SPIRIT LAKE ROAD
WINTER HAVEN FL 33880**

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.

SIGNATURE

Signature typed or printed name of registered agent and title 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
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ALLISON, CLARENCE 105 HOMEWOOD DR WINTER HAVEN FL 33880 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Miller, Dennis 114 Temple St. Winter Haven, FL 33880 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOUNTAIN, IKE 340 E SWOOPE ST LAKE ALFRED FL 33850 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Nicely, Jeff 3501 FDC Grove Rd. Davenport, FL 33837 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD OVERSTREET, TRACY 1840 15TH CT., N.W. WINTER HAVEN FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS PFINGSTON, ROBERT 4518 REDWOOD ST WINTER HAVEN FL 33880 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NICELY, JEFF 3501 FDC GROVE RD DAVENPORT FL 33837 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITTENTON, DAN 11 LAKE ARROWHEAD DR WINTER HAVEN FL 33880 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)