711567

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL .
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Calsary Community Church of Tampa, Inc.
DOCUMENT NUMBER: 7/1567
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
RALPH W. ARNOLD Name of Contact Person
CALVARY COMMUNITY CHARCH OF TAMPS INC
4811 GEORGE ROAD Address
THAPA FLORIDA 33634 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:

PASTOLat (

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIPM in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: CALVARY COMMUNITY CHURCH OF TRMPR, INC.
2. The principal office address: 48/1 GEORGE ROAD
TRMPR, FLR. 33634 3. The mailing address (if different):
4. Date of incorporation/qualification: 10/05/1966 Document number: 7/1567
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
BRAY, RICHARD LEE
BRAY, RICHARD LEE 10201 B. WALKER ROAD
THONOTOSASSA, FL. 335950
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
LALPH W. FRNOLD, PASTOR TOP 2
P.O. Box NOT acceptable
TAMPA, FLA. 33634
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
James B. Polson James B. Polson, PD
I hereby accept the appointment as registered agent and agree to act in this capacity. If further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Daffel 91 Jennell Dac. 28, 2010 Signature of Registered Agent Date Date
If signing on behalf of an entity:
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)