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Apr 28, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 763706

1. Corporation Name
CALVARY LOVE, INC.

Principal Place of Business 24352 NE 151 PL SALT SPRINGS FL 32134	Mailing Address 24352 NE 151 PL SALT SPRINGS FL 32134
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2. Principal Place of Business 21 3938 Villas Green Cr. Suite, Apt. #, etc. 22 City & State 23 Longwood, Fla. Zip 24 32779 Country 25 Seminole	2a. Mailing Address 26 3938 Villas Green Cr. Suite, Apt. #, etc. 27 City & State 28 Longwood, Fla. Zip 29 32779 Country 30 Seminole	3. Date Incorporated or Qualified 06/16/1982	4. FEI Number 59-2206738 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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9. Name and Address of Current Registered Agent

ROOKS, MARVIN E
2130 CHINOOK TRL
MAITLAND FL 32751

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	SOWDER, JIMMY	
STREET ADDRESS	24352 NE 151 PL	
CITY-ST-ZIP	SALT SPRINGS FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ROOKS, MARVIN E	
STREET ADDRESS	2130 CHINOOK TRAIL	
CITY-ST-ZIP	MAITLAND FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	STRICKLAND, ED	
STREET ADDRESS	BOX 32 SUNSET DR	
CITY-ST-ZIP	FROST PROOF FL	
TITLE	DST	<input type="checkbox"/> DELETE
NAME	SOWDER, CAROL	
STREET ADDRESS	24352 NE 151 PL	
CITY-ST-ZIP	SALT SPRINGS FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GLENDA, SOWDEN	
STREET ADDRESS	3938 VILLA GREEN CIRCLE	
CITY-ST-ZIP	LONGWOOD FL 32779	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	SOWDER, GLENDA	
5.3 STREET ADDRESS	3938 Villas Green Circle	
5.4 CITY-ST-ZIP	Longwood, Fla 32779	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with a letter like empowered.

SIGNATURE: *Carol Sowder* **SIGNATURE REQUIRED** 4-26-99 352-685-0530
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (1/98)