2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005895

FILED Mar 26, 2004 Secretary of State

Entity Name: CALVARY INTERNATIONAL MINISTRY OF ROYAL PALM BEACH INC.

Current Principal Place of Business: New Principal Place of Business: 100 PONCE DE LEON 1765 BENOIST FARM RD. ROYAL PLAM BEACH, FL 33411 WEST PALM BEACH, FL 33411 FΙ **Current Mailing Address: New Mailing Address:** 100 PONCE DE LEON 10698 BOBBIE LANE ROYAL PLAM BEACH, FL 33411 ROYAL PALM BEACH, FL 33411 FEI Number: 30-0189709 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TORRES, DANIEL 10698 10698 BOBBIE LANE ROYAL PLAM BEACH, FL 33411 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete TORRES, DANIEL Name: Name: Address: 10698 BOBBIE LANE Address: City-St-Zip: ROYALP PALM BEACH, FL 33411 City-St-Zip: Title: () Delete Title: () Change () Addition Name: TORRES, ELIZABETH Name: Address: 10698 BOBBIE LANE Address: City-St-Zip: ROYAL PLAM BEACH, FL 33411 City-St-Zip: Title: () Delete Title: (X) Change () Addition ARCE, NORMA Name: SLOANE, DAMARIS Name: 3269 HARNESS CIRCLE Address: Address: 116 LANCASTER City-St-Zip: LAKEWORTH, FL 33467 City-St-Zip: ROYAL PALM BEACH, FL 33414 () Change (X) Addition Title: () Delete Title: Name: Name: TORRES, JOSE Address: Address: 231-E FOX TAIL DR. WEST PALM BEACH, FL 33414 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: DANIEL TORRES P 03/26/2004