

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 19, 2009
Secretary of State**

DOCUMENT# N05000010067

Entity Name: CALVARY BAPTIST CHURCH OF PALATKA, INC.

Current Principal Place of Business:

3005 SOUTH PALM AVENUE
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

3005 SOUTH PALM AVENUE
PALATKA, FL 32177

New Mailing Address:

FEI Number: 59-1658905 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SANDERS, CHARLES B
129 ODOM ROAD
PALATKA, FL 32177 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: SANDERS, CHARLES B
Address: 129 ODOM ROAD
City-St-Zip: PALATKA, FL 32177

Title: D () Delete
Name: COULLIETTE, ADELL SR.
Address: 1369 HWY #19 S
City-St-Zip: PALATKA, FL 32177

Title: D () Delete
Name: MORRELL, LENWOOD R
Address: PO BOX 2212
City-St-Zip: PALATKA, FL 32178

Title: D () Delete
Name: SANDERS, THOMAS H
Address: PO BOX 962
City-St-Zip: PALATKA, FL 32178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DEBARA G. GOODWIN

TREA

04/19/2009

Electronic Signature of Signing Officer or Director

_____ Date