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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000003923

1. Corporation Name

CALVARY CHAPEL OF ORANGE PARK, INC.

Principal Place of Business

331 PARKRIDGE AVE
#2
ORANGE PARK FL 32065
US

Mailing Address

331 PARKRIDGE AVE
#2
ORANGE PARK FL 32065
US



2. Principal Place of Business

21 1101 Blanding Blvd.
Suite, Apt. #, etc.

22 # 109-111

23 ORANGE PARK, FL
City & State

24 32065 25 U.S.A.
Zip Country

2a. Mailing Address

26 1101 Blanding Blvd
Suite, Apt. #, etc.

27 # 109

28 Orange Park, FL
City & State

29 32065 30 U.S.A.
Zip Country

3. Date Incorporated or Qualified

08/30/1993

4. FEI Number

59-3200695

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

FREDRICH, CHRISTOPHER
702 ROGER SHERMAN ST
ORANGE PARK FL 32073

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS DELETE

TITLE PD
NAME FREDRICH, CHRISTOPHER J
STREET ADDRESS 702 ROGER SHERMAN ST
CITY-ST-ZIP ORANGE PARK FL

TITLE STD
NAME JENNINGS, WM. CHRISTOPHER
STREET ADDRESS 7190 PINNACLE DR. APT. J4
CITY-ST-ZIP FORT MEYER FL 33907

TITLE VD
NAME FREDRICH, AL
STREET ADDRESS 1901 NW 4TH ST
CITY-ST-ZIP BATTLE GROUND WA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE Change 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 all other like empowered.

SIGNATURE:

Christopher J. Fredrich
Signature and typed or printed name of signing officer or director

Date

1-22-99

Daytime Phone #

904-272-3063

CR2E037 (11/98)