

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761789

FILED  
Jan 09, 2008  
Secretary of State

**Entity Name:** CALVARY CHAPEL OF ST. PETERSBURG, INC.

**Current Principal Place of Business:**

8900 US HWY 19 N  
PINELLAS PARK, FL 33782 US

**New Principal Place of Business:**

**Current Mailing Address:**

8900 US HWY 19 N  
PINELLAS PARK, FL 33782 US

**New Mailing Address:**

**FEI Number:** 59-2322547

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RAGSDALE, FREDERICK  
550 59TH LANE S  
SAINT PETERSBURG, FL 33707 US

**Name and Address of New Registered Agent:**

SCHMIDT, JOHN  
8701-15TH WAY N  
SAINT PETERSBURG, FL 33702 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: JOHN SCHMIDT

01/09/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HODGES, DANNY  
Address: 4263 NAVAREZ WAY SOUTH  
City-St-Zip: ST PETERSBURG, FL 33712

Title: VSD ( ) Delete  
Name: SCHMIDT, JOHN  
Address: 8701-15TH WAY N  
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: TD ( ) Delete  
Name: LEE, JOHN  
Address: 542 GLENOAK ST N  
City-St-Zip: SAINT PETERSBURG, FL 33703

**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:

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: JOHN SCHMIDT

VSD

01/09/2008

Electronic Signature of Signing Officer or Director

Date