

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758756

FILED
Apr 13, 2009
Secretary of State

Entity Name: CALVARY INTERNATIONAL, INC.

Current Principal Place of Business:

3771 SPRING PARK RD.
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 10305
JACKSONVILLE, FL 322470305 US

New Mailing Address:

FEI Number: 59-2142637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMSON, JERRY
3771 SPRING PK RD
JACKSONVILLE, FL 32207 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: PD () Delete
Name: WILLIAMSON, JERRY
Address: 203 SOUTH ROSCOE BLVD.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: CD () Delete
Name: CARTER, GRADY DR.
Address: 4211 PEARL STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: VCD () Delete
Name: JONES, GENE
Address: 1043 DUNN AVE ST 1
City-St-Zip: JACKSONVILLE, FL 32218

Title: TD () Delete
Name: ADE, TED MR.
Address: 316 SWEETBRIAR BRANCH LANE
City-St-Zip: JACKSONVILLE, FL 32259

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: JERRY WILLIAMSON

PD

04/13/2009

Electronic Signature of Signing Officer or Director

Date