

**2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# N97000005938

**Entity Name:** CALVARY CHAPEL OF JUPITER, INC.

**Current Principal Place of Business:**

10100 W. INDIANTOWN RD.  
JUPITER, FL 33478

**Current Mailing Address:**

10100 W. INDIANTOWN RD.  
JUPITER, FL 33478

**FEI Number:** 65-0788249

**Certificate of Status Desired:** No

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

DAVIDSON, TIMOTHY  
1500 W. CYPRESS CREEK ROAD  
SUITE 104  
FT LAUDERDALE, FL 33309 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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            PLOURDE, DONALD  
Address        12925 159TH COURT N  
City-State-Zip: JUPITER FL 33478

Title            TREASURER  
Name            DAVIDSON, TIMOTHY  
Address        1500 W. CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title            D  
Name            CHINELLY, JOHN  
Address        2401 CYPRESS CREEK RD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title            VP  
Name            BROWN, KENNETH  
Address        18235 SE RIDGEVIEW DR.  
City-State-Zip: JUPITER FL 33458

Title            D  
Name            WEDA, DAVID  
Address        3112 CONTEGO LANE  
City-State-Zip: RIVIERA BEACH FL 33418

Title            D  
Name            FRANQUIZ, BOB  
Address        5803 NW 151ST ST  
                 SUITE 207  
City-State-Zip: MIAMI LAKES FL 33014

Title            SECRETARY  
Name            CUMMINGS, PENNY K  
Address        8974 SE SUNFISH PLACE  
City-State-Zip: HOBE SOUND FL 33455

I hereby 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 all other like empowered.

**SIGNATURE: PENNY CUMMINGS**

**SECRETARY**

**09/11/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date