## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 702382**

FILED Mar 14, 2006 Secretary of State

Entity Name: CALVARY BAPTIST CHURCH OF JACKSONVILLE, INC.

Current Principal Place of Business:			New Princi	New Principal Place of Business:	
4040 DUNI JACKSON	N AVE VILLE, FL 32218	US			
Current Mailing Address:			New Mailin	New Mailing Address:	
4040 DUNI JACKSON\	N AVE VILLE, FL 32218	US			
FEI Number:	59-6016475 I	FEI Number Applied For()	FEI Number Not Applic	cable ( ) Certificate of Status Desired ( )	
Name and	Address of Cur	rent Registered Agent:	Name and	Address of New Registered Agent:	
13426 ASH	VIL, GEORGE IFORD WOOD C VILLE, FL 32218				
The above in the State		omits this statement for the p	ourpose of changing its	s registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electronic	Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () De KRATOCHVIL, GEO 13426 ASHFORD \ JACKSONVILLE, F	ORGE WOOD CT E	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DDM () De GARLITZ, GLENN I 456310 OLD DIXIE CALLAHAN, FL 32	R E HIWAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () De BERKEY, J. N. 12754 DUNNS CRI JACKSONVILLE, F	EEK RD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S () De SAMBLE, JOSEPH 1065 PEBBLE RID JACKSONVILLE, F	I GE DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TRS () De LEE, MARION 11504 BOOTE BLV JAX, FL		Title: Name: Address: City-St-Zip:	TRS (X) Change ( ) Addition MCLAMB, WILLIAM 1050 PLAYER ROAD JAX, FL 32218	
Title: Name: Address: City-St-Zip:	DD () De JOHNSON, ALFRE 36111 WAGON TR HILLIARD, FL 320	D R AIL WAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: GEORGE KRATOCHVIL P 03/14/2006