

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 24, 2001 08:00 AM****Secretary of State****DOCUMENT # 703780****1. Entity Name****CALVARY UNITED METHODIST CHURCH, INCORPORATED, OF LAKE WORTH, FLORIDA**

Principal Place of Business	Mailing Address
301 FIRST AVENUE SOUTH	301 FIRST AVENUE SOUTH
LAKE WORTH FL 33460	LAKE WORTH FL 33460

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

4. FEI Number	Applied For
59-0895901	Not Applicable

5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MERKLE WILLIAM R WOOLBRIGHT CORP. CENTER 1901 SO CONGRESS AVE. STE 120 BOYNTON BEACH FL 33426 US	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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	04/24/2001
Signature, typed or printed name of registered agent and title if applicable.	DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10																								
<table><tr><td>TITLE</td><td>VTR</td><td><input type="checkbox"/> Delete</td></tr><tr><td>NAME</td><td>GOING ROBERT</td><td></td></tr><tr><td>STREET ADDRESS</td><td>410 N FEDERAL HIGHWAY</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td>LAKE WORTH FL 33460</td><td></td></tr></table>	TITLE	VTR	<input type="checkbox"/> Delete	NAME	GOING ROBERT		STREET ADDRESS	410 N FEDERAL HIGHWAY		CITY-ST-ZIP	LAKE WORTH FL 33460		<table><tr><td>TITLE</td><td>P</td><td><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td>DAN SHEPHERD</td><td></td></tr><tr><td>STREET ADDRESS</td><td>1902 NOTRE DAME DR.</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td>LAKE WORTH FL 33460</td><td></td></tr></table>	TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	DAN SHEPHERD		STREET ADDRESS	1902 NOTRE DAME DR.		CITY-ST-ZIP	LAKE WORTH FL 33460	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD BLECKNER	C	04/24/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #

CR2E037 (11/00)