2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 705594

FILED Aug 30, 2002 Secretary of State

Entity Name: CALVARY BAPTIST CHURCH, INC., OF PALM BEACH COUNTY

Current Principal Place of Business:				New Principal Place of Business:			
	1IT BOULEV M BEACH, F						
Current Mailing Address:				New Mailing Address:			
	1IT BOULEV M BEACH, F						
FEI Number:	59-1367588	FEI Number Applied For()	FEI Nun	nber Not Appl	icable ()	Certificate of St	tatus Desired ()
Name and	Address of (Current Registered Agent	:	Name and	Address o	f New Registere	d Agent:
SPEER, MORGAN W 1800 AUSTRALIAN AVENUE SOUTH., #100 WEST PALM BEACH, FL 33409 US				SPEER, W M 1800 AUSTRALIAN AVENUE SOUTH., #100 WEST PALM BEACH, FL 33409 US			
The above r	named entity of Florida.	submits this statement for the	he purpose o	f changing i	ts registered	d office or register	red agent, or both,
SIGNATURE: W. MORGAN SPEER				08/30/2002			
	Electro	nic Signature of Registered	Agent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	COOK, JACK 2638 GATELY) Delete DRIVE EAST., #29 BEACH, FL 33415		Title: Name: Address: City-St-Zip:		() Change () Addit	tion
Title: Name: Address: City-St-Zip:	ENOCHS, LAR 1189 SUNSET			Title: Name: Address: City-St-Zip:	VENABLE, F 4040 WINDH		tion
Title: Name: Address: City-St-Zip:	WRIGHT, LAW 4900 SUMMIT			Title: Name: Address: City-St-Zip:		() Change () Addit	tion
Title: Name: Address: City-St-Zip:	SHEARER, AL 1216 DREXEL			Title: Name: Address: City-St-Zip:		() Change () Addit	tion
Title: Name: Address: City-St-Zip:	SHEARER, DA 287 FOREST S) Delete .LE STATES DRIVE BEACH, FL 33415		Title: Name: Address: City-St-Zip:		() Change () Addit	tion
Title: Name: Address: City-St-Zip:	RYAN, WILLIA 231 LYTTON C			Title: Name: Address: City-St-Zip:		()Change ()Addii	tion

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM RYAN D 08/30/2002