

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705594

FILED  
Mar 28, 2006  
Secretary of State

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

**Current Principal Place of Business:**

4900 SUMMIT BOULEVARD  
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

8495 LAKE POINT COURT  
LAKE WORTH, FL 33467

**Current Mailing Address:**

4900 SUMMIT BOULEVARD  
WEST PALM BEACH, FL 33415

**New Mailing Address:**

8495 LAKE POINT COURT  
LAKE WORTH, FL 33467

**FEI Number:** 59-1367588

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLAND, JASON W  
8495 LAKE POINT CT  
LAKE WORTH, FL 33467 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: SP/P ( ) Delete  
Name: BLAND, JASON  
Address: 8495 LAKE POINT CT  
City-St-Zip: LAKE WORTH, FL 33467

Title: SD ( ) Delete  
Name: DIAMOND, DOUG  
Address: 4299 DIAMOND LANE  
City-St-Zip: LAKE WORTH, FL 33461

Title: D ( ) Delete  
Name: SHEARER, ALLEN  
Address: 1216 DREXEL ROAD  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: CD (X) Delete  
Name: SHEARER, DALE  
Address: 287 FOREST STATES DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33415

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: BM (X) Change ( ) Addition  
Name: BRACKEN, JOHN DR.  
Address: 5710 HAVERHILL ROAD  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: BM (X) Change ( ) Addition  
Name: ENOCHS, CONNIE  
Address: 1189 SUNSET ROAD  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JASON W. BLAND

SP/P

03/28/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date