2006 NOT-FOR-PROFIT CORPORATION ANMUAL REPORT (AR)

Apr 24, 2006 8:00 am Secretary of State **DOCUMENT # 707425** 1. Entity Name 04-24-2006 90466 033 ****61.25 CALVARY CHURCH OF THE OPEN BIBLE OF TAMPA. FLORDIA, INC. Principal Place of Business Mailing Address 6018 N. CHURCH AVE. TAMPA FL 33614 6018 N. CHURCH AVE. TAMPA FL 33614 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) Applied For City & State City & State 4. FEI Number 59-1308766 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MAGLOTT, JOHN W Street Address (P.O. Box Number is Not Acceptable) 6414 TOWN N' COUNTRY BLVD TAMPA FL 33615 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to \Box Due By May 1, 2006 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE TETLE ☐ Delete D ☐ Change Addition MAGLOTT (REV. JOHN W.) NAME NAME Francisco Vera STREET ADDRESS 6414 TOWN N" CONUTRY BLVD STREET ADDRESS 6619 N.Manhatten Ave. CITY-S1-ZIP **TAMPA FL. 33615** CITY-ST-ZIP Tampa, Fl. 33614 D TITLE ☐ Delete TITLE ☐ Change Addition DJanet Keck HULEC, JEFF NAM NAME 3404 W. PEARL AVE. 15807 Cottentail Pl. STREET ADDRESS STREET ADDRESS TAMPA FL 33611 CITY-ST-ZIP CITY-ST-ZIP Tampa, Fl. 33624 Delete Change ■ Addition TITLE TITLE JEFFERSON, JEAN NAME NAME STREET ADDRESS 6207 S. CHURCH ST. STREET ADDRESS CITY-ST-ZIP **TAMPA FL 33616** CITY-ST-ZIP fitt E ☐ Defete TITLE Change ☐ Addition ERWIN, SUE NAME STREET ADDRESS 4314 ZELAR ST STREET ADDRESS City-St-ZiP **TAMPA FL 33629** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition ESTES, CYNTHIA NAME NAME 12420N. FLORIDA AVE. # 268 STREET ADDRESS STREET ADDRESS TAMPA FL 33612 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE · Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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. 3-20-06 813-884-679 SIGNATURE: