

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707984

FILED
Jul 06, 2009
Secretary of State

Entity Name: MT. CALVARY BAPTIST CHURCH, INCORPORATED

Current Principal Place of Business:

800 NW 8TH AVENUE
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

PO BOX 726
POMPANO BEACH, FL 33060

New Mailing Address:

FEI Number: 65-0070771 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WALKER, BETTYE
217 NW 15TH STREET
POMPANO BEACH, FL 33060 US

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: P () Delete
Name: CAMPBELL, LAURA
Address: 3820 NW 6TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: V () Delete
Name: THURSTON, PERRY SR
Address: 2510 NW 4TH ST
City-St-Zip: POMPANO BEACH, FL 33064

Title: T () Delete
Name: ROBERTS, MALCOLM
Address: 6582 NW 103RD TERRACE
City-St-Zip: PARKLAND, FL 33076

Title: S () Delete
Name: HIGGS, DWIGHT
Address: 705 NE 3RD TERR
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: TYSON, ZADIA B
Address: 220 NW 15TH ST
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: LAURA CAMPBELL

P

07/06/2009

Electronic Signature of Signing Officer or Director

Date