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Apr 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **714200** (3)

1. Corporation Name

CALVARY COMMUNITY CHURCH OF MIAMI, INC.

Principal Place of Business 573 CAMPUS STREET 605 MARKET STREET #280 CELEBRATION FL 34747 US	Mailing Address 573 CAMPUS STREET 605 MARKET STREET #280 CELEBRATION FL 34747 US
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3. Date Incorporated or Qualified

03/04/1968

4. FEI Number

59-0873830

Applied For
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

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5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☒ No **NOT**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

REQUIRED

JONES, DONALD R. (DR.)
605 MARKET STREET, #280
CELEBRATION FL 34747

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **TSD** ☐ DELETE

NAME **JONES, JR. D**
STREET ADDRESS **6743 BROOKLINE DR**
CITY-ST-ZIP **MIAMI FL**

TITLE **PD** ☐ DELETE

NAME **JONES, DONALD R (DR.)**
STREET ADDRESS **605 MARKET STREET, #280**
CITY-ST-ZIP **CELEBRATION FL**

TITLE **D** ☐ DELETE

NAME **VANDUSER, KEVIN**
STREET ADDRESS **18500 CYPRESS CT**
CITY-ST-ZIP **MIAMI FL**

TITLE **D** ☐ DELETE

NAME **PLATON, ALEX**
STREET ADDRESS **310 NW 180TH AVE**
CITY-ST-ZIP **PEMBROKE PINES FL**

TITLE **D** ☐ DELETE

NAME **HERNANDEZ, JOSE**
STREET ADDRESS **850 SE 3RD PLACE**
CITY-ST-ZIP **HALEAH FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Donald R. Jones, Sr.** **DONALD R. JONES, SR.** **4/10/98** **407-566-8333**

CR2E037 (10/97)