## **FILE NOW: FILING FEE IS \$61.25**

9100 SW 55 ST.

**COOPER CITY FL** 

STREET ADDRESS

CITY - ST - ZIP

**FILED** Feb 17 1997 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Myrtham , ANNUAL REPORT. Secretary of State Secretary of State DIVISION OF CORPORATIONS 1997 **DOCUMENT** # (5)714398 CALVARY CHAPEL FREEWILL BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 8530 STIRLING ROAD 8530 STIRLING ROAD HOLLYWOOD FL 33024 HOLLYWOOD FL 33024-8212 3. Date Incorporated or Qualified 3a. Date of Last Report 04/05/1968 01/29/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1447539 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 24 29 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 **EDGMON, ANTHONY** Street Address (P.O. Box Number is Not Acceptable) 82 8530 STIRLING RD. 63 **HOLLYWOOD FL 33024** 84 City 85 Zip Code 54 pue 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. ed agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ilanature typed or prid 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 98/6) DELETE Change Addition TITLE 1.1 DITE NAME GARNER, JOHN 1.2 NAME STREET ADDRESS 9020 S.W. 54TH ST. 1.3 STREET ADDRESS COOPER CITY FL CITY - ST - 7IP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE HARBECK, DIANE 2.2 NAME NAME 11050 LAKEVIEW DRIVE N 2.3 STREET ADDRESS STREET ADDRESS PEMBROKE PINES FL 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE GRANIE, JOE 3.2 NAME NAME 10770 N.W. 26TH PL. 3.3 STREET ADDRESS STREET ADDRESS SUNRISE FL 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition HERL, JOHN NAME 4.2 NAME 5124 S.W. 93 AVE. 4.3 STREET ADDRESS STREET ADDRESS COOPER CITY FL 4.4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE NAME MOSLEY, BILL 5.2 NAME 5225 SW 90 AVE. STREET ADDRESS 5.3 STREET ADDRESS COOPER CITY FL CITY-ST-ZIP 5.4 CITY-ST-ZIP Change DELETE Addition TITLE 6.1 TITLE **BOLTA, JAMES** NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST- ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 or an attachment with an address.