2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2004
Secretary of State

DOCUMENT# 716616

Entity Name: CALVARY TEMPLE, INC. OF LAKE WALES, FLORIDA

Current Principal Place of Business:

337 W. CENTRAL
P.O. BOX 801
LAKE WALES, FL 33853

New Principal Place of Business:

Current Mailing Address:

337 W. CENTRAL
P.O. BOX 801
LAKE WALES, FL 33853

New Mailing Address:

FEI Number: 23-7048182 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARTIN,JOE T
416 S FIRST ST
LAKE WALES, FL 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: D ( ) Delete
Name: WINE, JOHN M.
Address: P.O. BOX 1273 N/A
City-St-Zip: LAKE WALES, FL

Title: D ( ) Delete
Name: MARVEL, JOHNNY
Address: 6693 LAKE BUFFUM RD.
City-St-Zip: FT. MEADE, FL

Title: D ( ) Delete
Name: BRYANT, BETH M.
Address: 2525 OLD BARTOW RD.
City-St-Zip: LAKE WALES, FL

Title: D ( ) Delete
Name: WINE, JOYCE A.
Address: 1039 HURLBUT CIRCLE
City-St-Zip: LAKE WALES, FL 33898

Title: D ( ) Delete
Name: RODDA, THOMAS W
Address: 3920 PINE HILL CT.
City-St-Zip: LAKE WALES, FL

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 for the exemption stated in Section 119.07(3)(i), 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: JOHN M WINE O 07/11/2004

Electronic Signature of Signing Officer or Director — Date