

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716616

FILED
Jan 26, 2006
Secretary of State

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

Current Principal Place of Business:

335 W. CENTRAL
P.O. BOX 801
LAKE WALES, FL 33859

New Principal Place of Business:

Current Mailing Address:

335 W. CENTRAL
P.O. BOX 801
LAKE WALES, FL 33859

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 33853 US

Name and Address of New Registered Agent:

WINE, E.J. PASTOR
3756 HURLBUT CIRCLE
LAKE WALES, FL 33898 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: E.J. WINE

01/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WINE, JOHN M.
Address: 1019 N TOWER LANE
City-St-Zip: LAKE WALES, FL 33853

Title: D () Delete
Name: MARVEL, JOHNNY
Address: 2553 MCCOWN ROAD
City-St-Zip: LAKE WALES, FL 33853

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 33853

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: D (X) Change () Addition
Name: WINE, JOYCE A.
Address: 3756 HURLBUT CIRCLE
City-St-Zip: LAKE WALES, FL 33898

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 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: JOYCE WINE

OFFI

01/26/2006

Electronic Signature of Signing Officer or Director

Date