

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90122 030 ****61.25

DOCUMENT # 721441

1. Entity Name

CALVARY BAPTIST CHURCH OF SILVER SPRINGS SHORES, INC.



Principal Place of Business

**10515 SE 115 AVE
OCALA FL 34472
US**

Mailing Address

**10515 SE 115 AVE
OCALA FL 34472
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1889890**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**DAVISON, STEPHEN REV
1 BROOK LANE
OCALA FL 34472**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **DAVISON, STEPHEN REV**
STREET ADDRESS **1 BROOK LANE**
CITY-ST-ZIP **OCALA, FL FL 34472**

TITLE **SD** ☐ Delete
NAME **GRAHLING, JACK**
STREET ADDRESS **6870 SE 99 PLACE**
CITY-ST-ZIP **BELLEVIEW FL 34420**

TITLE **D** ☐ Delete
NAME **DARIN HILL**
STREET ADDRESS **28 PINE RADIAL**
CITY-ST-ZIP **OCALA FL 34471**

TITLE **D** ☐ Delete
NAME **MARSHALL, ANDREW**
STREET ADDRESS **7223 SE 117 ST**
CITY-ST-ZIP **BELLEVIEW FL 34420**

TITLE **T** ☐ Delete
NAME **HILL, HAROLD**
STREET ADDRESS **2 HICKORY TRACK RUN**
CITY-ST-ZIP **OCALA FL 34472**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **RICK DRUSS**
STREET ADDRESS **4953 SE 33 TERRACE**
CITY-ST-ZIP **OCALA, FL 34480**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Stephen DAVISON

1-6-03

352-687-1181

CR2E037 (10/02)