## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Feb 14, 2007 8:00 am **DOCUMENT # 721904** Secretary of State 1. Entity Name 02-14-2007 90060 049 \*\*\*\*61.25 CALVARY CHURCH OF SEBRING, FLORIDA, INC. Principal Place of Business Mailing Address 1825 HAMMOCK RD. 1825 HAMMOCK RD. SEBRING FL 33872 SEBRING FL 33872 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc Suite. Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State Applied For City & State 4. FEI Number 35-2175247 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name OSBECK, LESTER Street Address (P.O. Box Number is Not Acceptable) 1825 HAMMOCK RD. SEBRING FL 33872 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 4 applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE PD ☐ Delete HHE Addition ☐ Change John Farnham NAME PATRICK, PAT NAME 4717 FEISON AVE STREET ADDRESS 2236 WHISPERING PINES D.R. STREET ADDRESS Sobritgi El. 33870 CITY-ST-7IP SEBRING FL 33872 CITY ST-ZIP DHazel Ellis TITLE \_\_\_ Change Delete TITLE Addition 3236 Hollyword Blul NAME HOOPER, SUE NAME STREET ADDRESS STREET ADDRESS 4130 FELSON AVENUE sebing, F1 33875 CHTY - ST - ZIP CITY-ST-ZIP SEBRING FL 33872 Delete ITTLE TITLE Change ☐ Addition D NAME MARÑÚÉ, BUDDY NAME STREET ADDRESS STREET ADDRESS 3000 HAMMER TERRACE City-St-ZIP CITY-ST-7IP SEBRING FL 33872 ☐ Delete TITLE TD Change | ☐ Addition HOOPER, RON STREET ADDRESS STREET ADDRESS 4130 FELSON AVENUE CITY - ST- ZIP SEBRING FL 33872 CITY-ST-ZIP TITLE ☐ Delete ШЕ Change ☐ Addition NAME OSBECK, LESTER NAME STREET ADDRESS STREET ADDRESS 1801 COLMAR AVE CITY - S1 - ZIP SEBRING FL 33870 CITY-ST-ZIP TITLE ☐ Delete HHE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- 7IP CHY-ST-ZIP

FILED

SIGNATURE: Letter Osbect 1-29-07 863-386-4900

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.