

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729006

FILED
Jan 26, 2005
Secretary of State

Entity Name: CALVARY INDEPENDENT BAPTIST CHURCH, INC.

Current Principal Place of Business:

529 CLIFFORD STREET
FT. WALTON BEACH, FL 325473137

New Principal Place of Business:

529 CLIFFORD STREET
FT. WALTON BEACH, FL 32547 US

Current Mailing Address:

529 CLIFFORD STREET
FT. WALTON BEACH, FL 325473137

New Mailing Address:

529 CLIFFORD STREET
FT. WALTON BEACH, FL 32547 US

FEI Number: 59-1506837

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAPEE, MYRLE
411 YANCEY ST
FT. WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

LAPEE, MYRLE
411 YANCEY ST
FT. WALTON BEACH, FL 32547 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:

Electronic Signature of Registered Agent

01/26/2005

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STEVENS, JOHN M
Address: 531 CLIFFORD STREET
City-St-Zip: FT WALTON BEACH, FL00000, FL 32547

Title: VT () Delete
Name: LAPEE,, MYRLE
Address: 411 YANCEY STREET
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: DS () Delete
Name: RANDOLPH, LARRY
Address: 11 PRYOR RD.
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STEVENS, JOHN M PRESIDE
Address: 531 CLIFFORD STREET
City-St-Zip: FORT WALTON BEACH,, FL 32547 US

Title: VT (X) Change () Addition
Name: LAPEE,, MYRLE VP, TRE
Address: 411 YANCEY STREET
City-St-Zip: FORT WALTON BEACH, FL 32547 US

Title: DS (X) Change () Addition
Name: RANDOLPH, LARRY SECRETA
Address: 11 PRYOR RD.
City-St-Zip: FORT WALTON BEACH, FL 32548 US

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. STEVENS

Electronic Signature of Signing Officer or Director

D

01/26/2005

Date