2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#729006

FILED Feb 03, 2006 Secretary of State

Entity Name: CALVARY INDEPENDENT BAPTIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

529 CLIFFORD STREET

FT. WALTON BEACH, FL 32547 US

Current Mailing Address: 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 (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LAPEE, MYRLE
411 YANCEY ST
LAPEE, MYRLE
731 LLOYD STREET

FT. WALTON BEACH, FL 32547 US 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: 02/03/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ()Delete Title: ()Change ()Addition

 Name:
 STEVENS, JÖHN M PRESIDE
 Name:

 Address:
 531 CLIFFORD STREET
 Address:

 City-St-Zip:
 FORT WALTON BEACH,, FL 32547 US
 City-St-Zip:

Name: LAPEE,, MYRLE VP, TRE Name: LAPEE,, MYRLE VP, TRE

Address: 411 YANCEY STREET Address: 731 LLOYD STREET

City-St-Zip: FORT WALTON BEACH, FL 32547 US City-St-Zip: FORT WALTON BEACH, FL 32547 US

Title: DS () Delete Title: SEC (X) Change () Addition
Name: RANDOLPH, LARRY SECRETA Name: AGUILAR, JESSE E SECRETA

Address: 11 PRYOR RD. Address: 821 LAUREL DRIVE

City-St-Zip: FORT WALTON BEACH, FL 32548 US City-St-Zip: FORT WALTON BEACH, FL 32547 US

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: JOHN M. STEVENS PRES 02/03/2006