

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 90697 019 \*\*\*\*61.25

**DOCUMENT # 745457**

1. Entity Name  
**CALVARY BAPTIST CHURCH (INDEPENDENT) OF  
CRYSTAL RIVER, INC.**



Principal Place of Business  
~~PO BOX 1207~~  
257 NE 9TH STREET  
CRYSTAL RIVER, FL 34423 US

Mailing Address  
~~PO BOX 1207~~  
257 NE 9TH STREET  
CRYSTAL RIVER, FL 34423 US



**DO NOT WRITE IN THIS SPACE**

04272004 No Chg-NP CR2E037 (10/03)

4. FEI Number  
59-2017360  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

HOLDER, ELBERT C  
1 KANSAS ST.  
BEVERLY HILLS, FL 34465

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IN THIS SPACE**

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

**Filing Fee is \$61.25  
Due by May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	HUTCHENS, ALAN M
STREET ADDRESS	5710 WEST MURPHY COURT Delete
CITY-ST-ZIP	HOMOSASSA, FL 34446
TITLE	TD
NAME	HOLDER, ELBERT
STREET ADDRESS	1 KANSAS
CITY-ST-ZIP	BEVERLY HILLS, FL
TITLE	T
NAME	HAMMER, JO
STREET ADDRESS	580 S. BAUER RD. Delete
CITY-ST-ZIP	LECANTO, FL 34461
TITLE	D
NAME	Hutchens, Alan, M.
STREET ADDRESS	257 NE 9th Street
CITY-ST-ZIP	Crystal River, Fl. 34423
TITLE	T
NAME	Wood, Betty
STREET ADDRESS	8050 West Duck Court
CITY-ST-ZIP	Homosassa, Fl. 34448
TITLE	D
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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** Elbert C. Holder *Elbert C. Holder* April 27, 2004 (352)746-0945  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #