

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749282

FILED
May 19, 2005
Secretary of State

Entity Name: CALVARY TABERNACLE UNITED PENTECOSTAL CHURCH, INC.

Current Principal Place of Business:

10930 US HWY 301 N.
THONOTOSASSA, FL 33592

New Principal Place of Business:

Current Mailing Address:

10930 US HWY 301 N.
THONOTOSASSA, FL 33592

New Mailing Address:

FEI Number: 59-2040610 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WOLFE, ELIZABETH A
6916 GREENHILL PLACE
TAMPA, FL 33616 US

Name and Address of New Registered Agent:

WOLFE, ELIZABETH A
6916 GREENHILL PLACE
TAMPA, FL 33617 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: ELIZABETH A. WOLFE

05/19/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: BRIMMAGE, CARLTON D,
Address: 17316 HANNA ROAD
City-St-Zip: LUTZ, FL

Title: TD () Delete
Name: LAWRENCE,CARLOS,
Address: 7716 SUMTER CT.
City-St-Zip: TAMPA, FL

Title: STD () Delete
Name: WOLFE, ELIZABETH A
Address: 10930 US HWY 301 N
City-St-Zip: THONOTOSASSA, FL 33592

Title: PCD () Delete
Name: WOLFE, JAMES A,
Address: 6916 GREENHILL PLACE
City-St-Zip: TEMPLE TERRACE, FL

Title: TD () Delete
Name: SIMPSON, ROGER JR,
Address: 3622 E 38TH AVENUE
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAMES A. WOLFE

PCD

05/19/2005

Electronic Signature of Signing Officer or Director

Date