## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#751411**

FILED Jan 09, 2004 Secretary of State

Entity Name: CALVARY BAPTIST CHURCH OF SEBASTIAN, INC.

**Current Principal Place of Business: New Principal Place of Business:** 123 THUNDERBIRD DR SEBASTIAN, FL 32958 **Current Mailing Address: New Mailing Address:** 123 THUNDERBIRD DR SEBASTIAN, FL 32958 FEI Number: 59-2448377 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CLIFTON J. COOLEY 485 LANFAIR AVE. SEBASTIAN, FL 32958 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 Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition DOUGLAS, HAZEL Name: Name: Address: 7300 20TH ST., STE. 622 Address: City-St-Zip: VERO BCH., FL City-St-Zip: Title: Title: C/D (X) Change ( ) Addition ( ) Delete Name: DAMRON, CHARLES, Name: DAMRON, CHARLES, Address: 1025 BARBER ST. Address: 1025 BARBER ST. City-St-Zip: SEBASTIAN, FL City-St-Zip: SEBASTIAN, FL Title: () Delete Title: () Change () Addition COOLEY, CLIFTON J Name: Name: 485 LANFAIR AVE. Address: Address: City-St-Zip: SEBASTIAN, FL City-St-Zip: Title: ( ) Delete Title: S/T (X) Change ( ) Addition Name: BOULDEN, ROBERT Name: BOULDEN, ROBERT 700 SILVERTHORN COURT Address: Address: 700 SILVERTHORN COURT City-St-Zip: BAREFOOT BAY, FL 32976 City-St-Zip: BAREFOOT BAY, FL 32976

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: ROBERT BOULDEN S/T 01/09/2004