

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754772

FILED  
Jan 08, 2009  
Secretary of State

**Entity Name:** BAYOU GEORGE CALVARY TEMPLE ASSEMBLY OF GOD, INC., OF PANAMA CITY, FLORIDA

**Current Principal Place of Business:**

8106 HWY 2301  
PANAMA CITY, FL 32404 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1246  
YOUNGSTOWN, FL 32466 US

**New Mailing Address:**

**FEI Number:** 59-2031258

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHAMBERS, SHARON  
13931 MASHBURN RD  
YOUNGSTOWN, FL 32466 US

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

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:**

Title: PD ( ) Delete  
Name: NICHOLS, EDDIE  
Address: 1903 CHERRY ST  
City-St-Zip: PANAMA CITY, FL 32401

Title: D ( ) Delete  
Name: CHAMBERS, RICHARD  
Address: 13931 MASHBURN RD  
City-St-Zip: YOUNGSTOWN, FL

Title: ST ( ) Delete  
Name: CHAMBERS, SHARON  
Address: 13931 MASHBURN RD.  
City-St-Zip: YOUNGSTOWN, FL 32466

Title: D ( ) Delete  
Name: CUMMINGS, JOHN  
Address: 8601 SEMINOLE ST  
City-St-Zip: YOUNGSTOWN, FL 32466

Title: D ( ) Delete  
Name: RILEY, CHARLES  
Address: 6311 KNOLLWOOD ST  
City-St-Zip: YOUNGSTOWN, FL 32466

**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 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: SHARON CHAMBERS

ST

01/08/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date