2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758756

FILED Jun 28, 2007 Secretary of State

Entity Name: CALVARY INTERNATIONAL, INC.

Julient F	Principal Place of Business:	New Principal Place of Business:	
	RING PARK RD. NVILLE, FL 32207 US		
Current N	Nailing Address:	New Mailing Address:	
PO BOX 1 JACKSON	10305 NVILLE, FL 322470305 US		
n accordar	r: 59-2142637 FEI Number Applied For() nce with s. 607.193(2)(b), F.S., the corporation did not re d Address of Current Registered Agent:	FEI Number Not Applicable () Certificate of Status Desired (ceive the prior notice. Name and Address of New Registered Agent:)
	-	Name and Address of New Registered Agent.	
3771 SPR	SON, JERRY NING PK RD NVILLE, FL 32207 US		
	e named entity submits this statement for the purple of Florida.	pose of changing its registered office or registered agent, or	ooth,
SIGNATU	RE:		
	Electronic Signature of Registered Agent	Date	
OFFICER	Electronic Signature of Registered Agent S AND DIRECTORS:	Date ADDITIONS/CHANGES TO OFFICERS AND DIRECT	стоі
OFFICER Title: Jame: Address: City-St-Zip:			сто
itle: lame: lddress:	VP (X) Delete MCCRANIE, MICHAEL S 914 ATLANTIC AVE, STE 1A	ADDITIONS/CHANGES TO OFFICERS AND DIRECTION Title: () Change () Addition Name: Address:	сто
ritle: lame: kddress: City-St-Zip: ritle: lame: kddress:	VP (X) Delete MCCRANIE, MICHAEL S 914 ATLANTIC AVE, STE 1A AMELIA ISLAND, FL 32034 PD () Delete WILLIAMSON, JERRY 203 SOUTH ROSCOE BLVD.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS (**) Change (**) Addition Name: Address: City-St-Zip: Title: (**) Change (**) Addition Name: Address:	ОТО
ritle: lame: kddress: City-St-Zip: ritle: lame: kddress: City-St-Zip: ritle: lame: kddress:	VP (X) Delete MCCRANIE, MICHAEL S 914 ATLANTIC AVE, STE 1A AMELIA ISLAND, FL 32034 PD () Delete WILLIAMSON, JERRY 203 SOUTH ROSCOE BLVD. PONTE VEDRA BEACH, FL 32082 SD () Delete CARTER, GRADY DR. 4211 PEARL STREET	ADDITIONS/CHANGES TO OFFICERS AND DIRECTION Title: () Change () Addition Name: Address: () Change () Addition	ОТО

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: JERRY WILLIAMSON PD 06/28/2007