

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767679

FILED
Jan 04, 2007
Secretary of State

Entity Name: CALVARY BAPTIST CHURCH OF MIDDLEBURG, INC.

Current Principal Place of Business:

1532 LONGBAY RD
MIDDLEBURG, FL 32068

New Principal Place of Business:

Current Mailing Address:

1532 LONGBAY RD
MIDDLEBURG, FL 32068

New Mailing Address:

FEI Number: 59-2352930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLEDGER, KENNETH O.
1855 KILLARN CIRCLE
MIDDLEBURG, FL 32068 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: D () Delete
Name: BOLTON, DARRELL DEACON
Address: 2527 CROOKED CREEK PT.
City-St-Zip: MIDDLEBURG, FL 32068

Title: D () Delete
Name: JONES, ANTHONY DEACON
Address: 2060 CRESTVIEW COURT
City-St-Zip: MIDDLEBURG, FL 32068

Title: D () Delete
Name: MCMULLIN, MATTHEW DEACON
Address: 1783 SHERATON LAKES CIRCLE
City-St-Zip: MIDDLEBURG, FL 32068

Title: T () Delete
Name: ALLEN, PAUL TRUSTEE
Address: 4206 HOLLY CT.
City-St-Zip: MIDDLEBURG, FL 32068

Title: T () Delete
Name: MARTIN, SPENCER TRUTEE
Address: 409 POLK AVENUE
City-St-Zip: ORANGE PARK, FL 32065

Title: T () Delete
Name: MINCHEW, STEVE TRUSTEE
Address: 2612 INDIGO AVENUE
City-St-Zip: MIDDLEBURG, FL 32068

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
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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 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: ANTHONY JONES

D

01/04/2007

Electronic Signature of Signing Officer or Director

Date