2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# 767679

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:	MARTIN, SPENCER TRUTEE	
Address:	409 POLK AVENUE	
City-St-Zip:	ORANGE PARK, FL 32065	

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:	

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: ANTHONY JONES MR. 04/06/2009

Electronic Signature of Signing Officer or Director — Date