2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Sep 08, 2006 8:00 am Secretary of State DOCUNENT # N00000005332 1. Entity Name 09-08-2006 90002 025 ****61.25 CALVARY DELIVERANCE TEMPLE, INC. Principal Place of Business Mailing Address 11130 HIGHWAY 97 WALNUT HILL FL 32568 DAVISVILLE, FL WALNUT HILL FL 32568 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 2nd MOORE CR2E037 (4/06) Applied For City & State City & State 4. FEI Number **NO-T APPLICABLE** Not Applicable Zin Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ENFINGER, PAUL P.O. Box Number is Not Acceptable) 11130 HIGHWAY 97 WALNUT HILL FL 32568 City 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstaling) FILE NOW: FEE IS \$61.25 Due By September 6; 2006 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Defete TITLE Addition ☐ Change ENFINGER, PAUL D REV NAME 11130 HIGHWAY 97 STREET ADDRESS STREET ADDRESS WALNUT HILL FL 32568 CITY-ST-ZIP CITY-ST-ZiP ☐ Delete TITLE ☐ Change . ☐ Addition ENFINGER, SHEILA P NAME 11130 HIGHWAY 97 STREET ADDRESS STREET ADORESS WALNUT HILL FL 32568 CITY - ST - ZIP CITY-ST-ZIP TRILE" ☐ Delete 11It F ☐ Addition CANTLEY, LETHA B NAME NAME 5000 SANDY HOLLOW ROAD STREET ADDRESS STREET ADDRESS CENTURY FL 32535 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TILLE Change ☐ Addition CANTLEY, FRANKLIN D NAME NAME 5000 SANDY HOLLOW ROAD STREET ADDRESS STREET ADDRESS CENTURY FL 32535 CITY - ST - ZIP CITY-ST-ZIP IME ☐ Detete ☐ Change ☐ Addition GARRETT, WILLIAM J NAME 5000 SANDY HOLLOW ROAD STREET ADDRESS STREET ADDRESS CENTURY FL 32535 CITY-ST-ZIF CITY-ST-79P TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am a 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

8-29-06