

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 16, 2007 8:00 am
Secretary of State

05-16-2007 90026 023 ****61.25

DOCUMENT # N00000005332

1. Entity Name

CALVARY DELIVERANCE TEMPLE, INC.



Principal Place of Business

Mailing Address

DAVISVILLE, FL.
WALNUT HILL FL 32568

11130 HIGHWAY 97
WALNUT HILL FL 32568



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ENFINGER, PAUL
11120 HIGHWAY 97
WALNUT HILL FL 32568

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Delete
NAME	ENFINGER, PAUL D REV	
STREET ADDRESS	11130 HIGHWAY 97	
CITY-STATE-ZIP	WALNUT HILL FL 32568	
TITLE	T	<input type="checkbox"/> Delete
NAME	ENFINGER, SHEILA P	
STREET ADDRESS	11130 HIGHWAY 97	
CITY-STATE-ZIP	WALNUT HILL FL 32568	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	CANTLEY, LETHA B	
STREET ADDRESS	5000 SANDY HOLLOW ROAD	
CITY-STATE-ZIP	CENTURY FL 32535	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	CANTLEY, FRANKLIN D	
STREET ADDRESS	5000 SANDY HOLLOW ROAD	
CITY-STATE-ZIP	CENTURY FL 32535	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	GARRETT, WILLIAM J	
STREET ADDRESS	5000 SANDY HOLLOW ROAD	
CITY-STATE-ZIP	CENTURY FL 32535	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Steven Matheny	
STREET ADDRESS	Robinsonville Rd.	
CITY-STATE-ZIP	Atmore Alabama	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sheila Enginger	
STREET ADDRESS	11130 Hwy. 97	
CITY-STATE-ZIP	Walnut Hill, FL 32568	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Carl Matheny	
STREET ADDRESS	Robinsonville Rd.	
CITY-STATE-ZIP	Atmore Alabama	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Paul D. Enginger

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-07

Date

Daytime Phone #