

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005347

FILED  
Jan 13, 2011  
Secretary of State

**Entity Name:** CALVARY CHAPEL OF VENICE, INC.

**Current Principal Place of Business:**

602 ALBEE FARM ROAD  
NOKOMIS, FL 34275

**New Principal Place of Business:**

**Current Mailing Address:**

594 NORTH QUINCY ROAD  
VENICE, FL 34293

**New Mailing Address:**

**FEI Number:** 65-1050979

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WULFING, BARBARA E  
594 NORTH QUINCY ROAD  
VENICE, FL 34293 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: PT  
Name: WULFING, WAYNE R  
Address: 594 NORTH QUINCY ROAD  
City-St-Zip: VENICE, FL 34293

Title: VP  
Name: WULFING, BARBARA E  
Address: 594 NORTH QUINCY ROAD  
City-St-Zip: VENICE, FL 34293

Title: S  
Name: WULFING, BARBARA E  
Address: 594 NORTH QUINCY ROAD  
City-St-Zip: VENICE, FL 34293

Title: D  
Name: DIXON, CARL  
Address: 4614 HIDDEN VIEW PL  
City-St-Zip: SARASOTA, FL 34235

Title: D  
Name: SHEDLEBOWER, DARIN  
Address: 3014 LINWOOD DR  
City-St-Zip: SARASOTA, FL 34232

I hereby 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 all other like empowered.

SIGNATURE: BARBARA E WULFING

VP

01/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date