2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2005
Secretary of State

DOCUMENT# N00000006922

Entity Name: CALVARY CHAPEL OF FLAGLER COUNTY, INC.

Current Principal Place of Business:

<UNUSED>
ORMOND BCH, FL 32174

New Principal Place of Business:

314 MOODY BLVD
FLAGLER BEACH, FL 32136

Current Mailing Address:

3640 ARAN CIR.
ORMOND BCH, FL 32174

New Mailing Address:

FEI Number: 59-3673744 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HITZ, ANDREW M
3640 ARAN CIR.
ORMOND BCH, FL 32174 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:	PSD	( ) Delete
Name:	HITZ, ANDREW M	
Address:	3640 ARAN CIR.	
City-St-Zip:	ORMOND BCH, FL 32174	
Title:	TD	( ) Delete
Name:	HITZ, SHARIE	
Address:	3640 ARAN CIR.	
City-St-Zip:	ORMOND BCH, FL 32174	
Title:	D	( ) Delete
Name:	BLACKWELL, DAVID P	
Address:	4267 FOX TRACE	
City-St-Zip:	BOYNTON BCH, FL 33436	
Title:	D	( ) Delete
Name:	MARSE, GEORGE	
Address:	4117 FLORAL DR	
City-St-Zip:	BOYNTON BEACH, FL 33436	
Title:	D	( ) Delete
Name:	MASSEY, JOSEPH	
Address:	12460 SANDWEDGE DR	
City-St-Zip:	BOYNTON BEACH, FL 33437	
Title:	D	( ) Delete
Name:	EKSTEIN, DAVID	
Address:	5410 ADAMS ROAD	
City-St-Zip:	DELRAY BEACH, FL 33484	

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:	
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 Section 119.07(3)(i), 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: ANDREW M HITZ P 04/23/2005
Electronic Signature of Signing Officer or Director — Date