## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00198

FILED May 15, 2009 Secretary of State

Entity Name: CALVARY BAPTIST CHURCH INC. CAPE CORAL. FLORIDA

urrent P	rincipal Place of Business:	New Principal Place of Business:	
	TH TERR RAL, FL 33990 US		
urrent N	lailing Address:	New Mailing Address:	
	FICE BOX 150354 RAL, FL 33915 US		
	: 59-2231506 FEI Number Applied For ( ) noe with s. 607.193(2)(b), F.S., the corporation di	FEI Number Not Applicable ( ) Certificate of Status Desir I not receive the prior notice.	ed ( )
ame and	d Address of Current Registered Agent	Name and Address of New Registered Agent:	
ITCHCO	CK, CHAD		
355 LITT	CIT, CITAD FLE STONE CT ORT MYERS, FL 33903 US		
S55 LITT ORTH F ne above the Stat	TLE STONE CT ORT MYERS, FL 33903 US e named entity submits this statement for the of Florida.  RE:	e purpose of changing its registered office or registered agent	, or both
355 LITT ORTH F ne above the Stat	TLE STONE CT ORT MYERS, FL 33903 US e named entity submits this statement for the of Florida.		, or both
355 LITT ORTH F ne above the Stat GNATU	TLE STONE CT ORT MYERS, FL 33903 US e named entity submits this statement for the of Florida.  RE:		
355 LITT ORTH F ne above the Stat GNATU	TLE STONE CT ORT MYERS, FL 33903 US e named entity submits this statement for the of Florida.  RE: Electronic Signature of Registered	Agent Date	
B55 LITTORTH F  The above the State  GNATU  FFICER  The t	CLE STONE CT ORT MYERS, FL 33903 US  e named entity submits this statement for the of Florida.  RE: Electronic Signature of Registered  S AND DIRECTORS:  PD () Delete HITCHCOCK, CHAD 5855 LITTLE STONE CT.	Agent Date  ADDITIONS/CHANGES TO OFFICERS AND DI  Title: ( ) Change ( ) Addition  Name: Address:	

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: DOUGLAS WILLIAMS TREA 05/15/2009