

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

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # N02000002968

1. Entity Name

NEW CALVARY TEMPLE CHURCH OF GOD, INC.



Principal Place of Business

120 JACKSON ST.
CENTURY FL 32535

Mailing Address

PO BOX 749
CENTURY FL 32535



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

120 Jackson St
Suite, Apt. #, etc.

3. Mailing Address

PO Box 749
Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/06)

City & State

Century Florida

City & State

Century Florida

4. FEI Number

03-0427942

Applied For

Not Applicable

Zip

32535

Country

ESC

Zip

32535

Country

ESC

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RILEY, NANCY
7440 FIELD RD.
CENTURY FL 32535

7. Name and Address of New Registered Agent

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

Nancy Riley CO Pastor

1-25-07

(Signature, typed or printed name of registered agent and title is acceptable)

(NOTE: Registered Agent signature required when re-registering)

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

TITLE: D ☐ Delete
NAME: DAVIS, ROSA
STREET ADDRESS: 233 LIBERTY ST.
CITY-STATE-ZIP: ATMORE AL 36502

TITLE: D ☐ Delete
NAME: JAMES, TRINA
STREET ADDRESS: P. O. BOX 528
CITY-STATE-ZIP: CENTURY FL 32535

TITLE: D ☐ Delete
NAME: RILEY, NANCY
STREET ADDRESS: 7440 FIELD RD.
CITY-STATE-ZIP: CENTURY FL 32535

TITLE: C ☐ Delete
NAME: RILEY, DASHWOOD
STREET ADDRESS: 697 EWING DR.
CITY-STATE-ZIP: ATMORE AL 36502

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition
NAME: **U000000608689**
STREET ADDRESS: **01/31/07-80007-011 61.25**
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition
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STREET ADDRESS:
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TITLE: ☐ Change ☐ 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:

Nancy Riley Nancy Riley

1-25-07 251-446-1604