2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005801

FILED Jun 22, 2006 Secretary of State

Entity Name: CALVARY TABERNACLE OF DELRAY BEACH INC.

Current Principal Place of Business:		New Principal Place of Business:	New Principal Place of Business:	
	BT ATLANTIC AVE BEACH, FL 33445			
Current Mailing Address:		New Mailing Address:		
	ERTURE CIRCLE TON, FL 33428			
n accordan	: 02-0632764 FEI Number Applied For (ice with s. 607.193(2)(b), F.S., the corporation I Address of Current Registered Ager	did not receive the prior notice.)	
	ISRAEL ERTURE CIRCLE TON, FL 33428 PB US			
	e named entity submits this statement for e of Florida.	r the purpose of changing its registered office or registered agent, or	both	
SIGNATU	RE:			
	Electronic Signature of Registere	ed Agent Date		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTO		
itle: lame: ddress: :ity-St-Zip:	SVP () Delete COMERFORD, JIM 38 BETHESDA PARK BOYNTON BEACH, FL 33435	Title: () Change () Addition Name: Address: City-St-Zip:		
itle: lame: .ddress: :ity-St-Zip:	CB () Delete RITER, TYE 1245 NW 22ND AVE DELRAY BEACH, FL 33445	Title: () Change () Addition Name: Address: City-St-Zip:		
	VP () Delete	Title: () Change () Addition		
itle: lame: .ddress: city-St-Zip:	STULTZ, CHRIS 4991 SW 7TH STREET MARGATE, FL 33068	Name: Address: City-St-Zip:		
ame: ddress:	STULTZ, CHRÍS 4991 SW 7TH STREET	Name: Address:		
ame: ddress: ity-St-Zip: itle: ame: ddress:	STULTZ, CHRIS 4991 SW 7TH STREET MARGATE, FL 33068 VPAT () Delete EWING, RODNEY E 6043 SE 126TH STREET	Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:		

I hereby certify that the information supplied with this filing does not qualify for the 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: ISRAEL ROSADO PB 06/22/2006