2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2009
Secretary of State

DOCUMENT# N03000007825

Entity Name: CALVARY CHAPEL SPACE COAST, INC.

Current Principal Place of Business:

5195 SOUTH WASHINGTON AVE.
SUITE 2
TITUSVILLE, FL 32780 US

New Principal Place of Business:

Current Mailing Address:

4875 ARECA PALM ST.
COCOA, FL 32927 US

New Mailing Address:

FEI Number: 75-3128265 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EICKHOFF, BARON
5260 CURTIS BLVD.
PORT ST. JOHN, FL 32927 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:	P	( ) Delete
Name:	EICKHOFF, BARON	
Address:	5260 CURTIS BLVD.	
City-St-Zip:	PORT ST. JOHN, FL 32927 US	
Title:	VP	( ) Delete
Name:	BROADBENT, DOUGLAS	
Address:	4875 ARECA PALM ST	
City-St-Zip:	COCOA, FL 32927 US	
Title:	T	( ) Delete
Name:	BOARD, TIMOTHY	
Address:	2563 INDIAN HILL CT	
City-St-Zip:	TITUSVILLE, FL 32780 US	
Title:	D	( ) Delete
Name:	WILD, MALCOLM	
Address:	3500 N COURTNEY BLVD	
City-St-Zip:	MERRITT ISLAND, FL 32953 US	
Title:	S	( ) Delete
Name:	BOARD, TIM	
Address:	2563 INDIAN HILL CT	
City-St-Zip:	TITUSVILLE, FL 32780 US	
Title:	D	( ) Delete
Name:	ALLEN, GIB	
Address:	4025 EDGEWATER DR.	
City-St-Zip:	ORLANDO, FL 32804 FL	

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 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 BROADBENT VP 01/17/2009
Electronic Signature of Signing Officer or Director — Date