2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 14, 2007
Secretary of State

DOCUMENT# N04000002083

Entity Name: CALVARY HEALTH AND SUPPORT INC.

Current Principal Place of Business:

9001 CRESCENT DRIVE
MIRAMAR, FL 33025

New Principal Place of Business:

540 NW 165 STREET ROAD
207
NORTH MIAMI BEACH, FL 33169 US

Current Mailing Address:

9001 CRESCENT DRIVE
MIRAMAR, FL 33025

New Mailing Address:

540 NW 165 STREET ROAD
207
NORTH MIAMI BEACH, FL 33169 US

FEI Number: 20-0789142 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ODIH, BOLA
9001 CRESCENT DRIVE
MIRAMAR, FL 33025 US

Name and Address of New Registered Agent:

OSHOKOYA, RASHEED O DR.
540 NW 165 STREET ROAD
207
NORTH MIAMI BEACH, FL 33169 US

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: R.O 08/14/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: ODIH, BOLA
Address: 9001 CRESCENT DRIVE
City-St-Zip: MIRAMAR, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: OSHOKOYA, RASHEED O DR.
Address: 540 NW 165 STREET ROAD, SUITE #207
City-St-Zip: N. MIAMI BEACH, FL 33169 US

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: RASHEED O. OSHOKOYA P 08/14/2007
Electronic Signature of Signing Officer or Director Date