

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002145

FILED  
Feb 09, 2007  
Secretary of State

Entity Name: CALVARY CHRISTIAN KIDS FOUNDATION, INC.

**Current Principal Place of Business:**

2175 BUENA VISTA AVE  
MELBOURNE, FL 32934 US

**New Principal Place of Business:**

**Current Mailing Address:**

2175 BUENA VISTA AVE  
MELBOURNE, FL 32934 US

**New Mailing Address:**

FEI Number: 20-2293653

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

OKTELA, RICHARD L  
2175 BUENA VISTA AVE  
MELBOURNE, FL 32934 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: OKTELA, RICHARD L  
Address: 2175 BUENA VISTA AVE  
City-St-Zip: MELBOURNE, FL 32934 US

Title: T ( ) Delete  
Name: KETTERING, CLAYTON  
Address: 1390 WHALING AVE SE  
City-St-Zip: PALM BAY, FL 32909 US

Title: S ( ) Delete  
Name: WATSON, EDDIE  
Address: 8855 SHERIDAN ROAD  
City-St-Zip: WEST MELBOURNE, FL 32904 US

Title: VP ( ) Delete  
Name: BURGER, ROBERT T  
Address: 200 S HARBOR CITY BLVD STE 303  
City-St-Zip: MELBOURNE, FL 32935 US

Title: VP ( ) Delete  
Name: SALBERG, HERBERT L  
Address: 2452 WOODFIELD CIRCLE  
City-St-Zip: WEST MELBOURNE, FL 32904 US

**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:

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: RICHARD L OKTELA

P

02/09/2007

Electronic Signature of Signing Officer or Director

Date