

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 05, 2008 08:00 A
Secretary of State

DOCUMENT # N05000008285

1. Entity Name

CALVARY BAPTIST CHURCH OF DAYTONA BEACH,
FLORIDA, INC.



Principal Place of Business

Mailing Address

210 N PENINSULA DRIVE
DAYTONA BEACH FL 32118

210 N PENINSULA DRIVE
DAYTONA BEACH FL 32118



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-0637820

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/07)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DUFFETT, HENRY P
120 E GRANADA BLVD
ORMOND BEACH FL 32176

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

Signature, typed or printed name of registered agent and title (if applicable)

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

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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 ☐ Delete
NAME EDWARDS, A RONALD
STREET ADDRESS 1625 RIDGE AVENUE
CITY-ST-ZIP HOLLY HILL FL 32117

TITLE ☐ Delete
NAME PERRY, ADNER
STREET ADDRESS 48 BEACHWOOD DR
CITY-ST-ZIP ORMOND BEACH FL 32176

TITLE ☐ Delete
NAME DUFFETT, HENRY P
STREET ADDRESS 1187 N HALIFAX AVE
CITY-ST-ZIP DAYTONA BEACH FL 32118

TITLE ☐ Delete
NAME RIHERD, SHIRLEY
STREET ADDRESS 336 PELICAN AVENUE
CITY-ST-ZIP DAYTONA BEACH FL 32118

TITLE ☐ Delete
NAME BODE, PETER C
STREET ADDRESS 268 WILLIAMS STREET
CITY-ST-ZIP DAYTONA BEACH FL 32118

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-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: *Henry P. Duffett Director/trustee* *March 2, 2008* *386*
Henry P. Duffett Director/trustee *March 2, 2008* *670-0420*