

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jul 24, 2007 8:00 am**  
**Secretary of State**

07-24-2007 90041 040 \*\*\*\*70.00

DOCUMENT # N06000009108

1. Entity Name

CALVARY ACADEMY-FLORIDA, INC.



Principal Place of Business

595 MAIN STREET  
DUNEDIN FL 34698

Mailing Address

595 MAIN STREET  
DUNEDIN FL 34698



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

6400 BETHLEHEM RD

3. Mailing Address

5400 BETHLEHEM RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

BETHLEHEM

2nd MOORE

CR2E037 (4/07)

City & State

MULBERRY FLORIDA

City & State

MULBERRY

4. FEI Number

35-2283084

Applied For

Not Applicable

Zip

33860

Country

POLK

Zip

FL

Country

POLK

5. Certificate of Status Desired

X

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BRANDT, MARK W  
595 MAIN STREET  
DUNEDIN FL 34698

7. Name and Address of New Registered Agent

Name Robert WASSER

Street Address (P.O. Box Number is Not Acceptable)  
5400 BETHLEHEM RD

City MULBERRY

FL

Zip Code 33860

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

Robert Wasser CFO

7-18-2007

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25  
Due By September 5, 2007

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 P  
NAME SCHULTZ, ROGER W  
STREET ADDRESS 595 MAIN STREET  
CITY-ST-ZIP DUNEDIN FL 34698 ☐ Delete

TITLE ST  
NAME WASSER, BOB  
STREET ADDRESS 595 MAIN STREET  
CITY-ST-ZIP DUNEDIN FL 34698 ☐ Delete

TITLE V  
NAME WEISHEIM, CARL  
STREET ADDRESS 595 MAIN STREET  
CITY-ST-ZIP DUNEDIN FL 34698 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME ROGER SCHULTZ  
STREET ADDRESS 5400 BETHLEHEM RD  
CITY-ST-ZIP MULBERRY FL 33860 ☒ Change ☐ Addition

TITLE  
NAME Robert WASSER  
STREET ADDRESS 6400 BETHLEHEM RD  
CITY-ST-ZIP MULBERRY FL 33860 ☐ Change ☐ Addition

TITLE  
NAME CARL WEISHEIM  
STREET ADDRESS 5400 BETHLEHEM RD  
CITY-ST-ZIP MULBERRY FL 33860 ☐ Change ☐ Addition

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Robert Wasser CFO

7-18-2007

414-727-1065