


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N06000009108	
1. Entity Name CALVARY ACADEMY-FLORIDA, INC.	

Principal Place of Business 5400 BETHLEHEM RD MULBERRY, FL 33860	Mailing Address 5400 BETHLEHEM RD MULBERRY, FL 33860
--	--

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent BRANDT, MARK W 5400 BETHLEHEM RD MULBERRY, FL 33860
--

DO NOT WRITE
IN THIS SPACE

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 _____
-----------------	--	---	------------

Filing Fee is \$61.25 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/>	\$5.00 May Be Added to Fees
--	---	------------------------------------

10. OFFICERS AND DIRECTORS	
TITLE	P
NAME	SCHULTZ, ROGER W
STREET ADDRESS	5400 BETHLEHEM RD
CITY-ST-ZIP	MULBERRY, FL 33860
TITLE	ST
NAME	WASSER, BOB
STREET ADDRESS	5400 BETHLEHEM RD
CITY-ST-ZIP	MULBERRY, FL 33860
TITLE	V
NAME	WEISHEIM, CARL
STREET ADDRESS	5400 BETHLEHEM RD
CITY-ST-ZIP	MULBERRY, FL 33860
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

U000000957903
08/18/08-80007-006 61.25

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: <u>Robert Wasser</u>	CFO	8-13-2008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date

FILED
Aug 18, 2008 08:00 AM
Secretary of State



07292008 No Chg-NP CR2E037 (4/06)

4. FEI Number 35-2283084	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required