2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008
Secretary of State

DOCUMENT# N07000001290

Entity Name: CALVARY'S POINT INC.

Current Principal Place of Business:

624 IRIS STREET
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

2007 ELMHURST STREET
MASCOTTE, FL 34753

Current Mailing Address:

624 IRIS STREET
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

PO BOX 940992
MAITLAND, FL 32794

FEI Number: 90-0338956 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLOOM, STEVEN D
624 IRIS STREET
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

BLOOM, STEVEN D
2007 ELMHURST STREET
MASCOTTE, FL 34753 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: ______________________ 01/14/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	DIR ( ) Delete
Name:	BLOOM, STEVEN D
Address:	624 IRIS STREET
City-St-Zip:	ALTAMONTE SPRINGS, FL 32714
Title:	DIR ( ) Delete
Name:	BLOOM, LISA R
Address:	624 IRIS STREET
City-St-Zip:	ALTAMONTE SPRINGS, FL 32714
Title:	DIR ( ) Delete
Name:	LOUCKS, KENNETH R
Address:	512 AUTUMN DRIVE
City-St-Zip:	APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	CEO (X) Change ( ) Addition
Name:	BLOOM, STEVEN D
Address:	2007 ELMHURST STREET
City-St-Zip:	MASCOTTE, FL 34753
Title:	DIR (X) Change ( ) Addition
Name:	HUGHES, MARILYN MRS
Address:	1061 WINDSONG CIRCLE
City-St-Zip:	APOPKA, FL 32703
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: STEVEN D BLOOM CEO 01/14/2008
Electronic Signature of Signing Officer or Director — Date