

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08161

FILED
Apr 30, 2008
Secretary of State

Entity Name: CALVARY BAPTIST CHURCH OF DADE CITY, FLORIDA, INC.

Current Principal Place of Business:

14312 17TH STREET
DADE CITY, FL 33523 US

New Principal Place of Business:

Current Mailing Address:

14312 17TH STREET
DADE CITY, FL 33523 US

New Mailing Address:

FEI Number: 59-2353941 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SINGLETON, DAVY
37248 CARTER AVE
DADE CITY, FL 33523 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: S () Delete
Name: STALLINGS, DANIEL
Address: P O BOX 582
City-St-Zip: DADE CITY, FL 33526

Title: D () Delete
Name: PITTS, PATRICK TRUSTEE
Address: 33901 TRILBY RD.
City-St-Zip: DADE CITY, FL 33523

Title: D () Delete
Name: PARRISH, CHUCK TRUSTEE
Address: 11399 CR 675 W.
City-St-Zip: WEBSTER, FL 33597

Title: D () Delete
Name: LEWIS, SHERRY TRUSTEE
Address: 37311 MAGNOLIA AVE.
City-St-Zip: DADE CITY, FL 33523

Title: T () Delete
Name: MILLER, BRADLEY
Address: 14138 18TH CT
City-St-Zip: DADE CITY, FL 33525

Title: C () Delete
Name: CAGLE, NEWELL
Address: 5829 DAYTON ST
City-St-Zip: ZEPHYRHILLS, FL 33542

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ADDISON, BEA TRUSTEE
Address: P O BOX 830
City-St-Zip: DADE CITY, FL 33526

Title: D (X) Change () Addition
Name: BLOODWORTH, TERESA TRUSTEE
Address: 14035 21ST STREET
City-St-Zip: DADE CITY, FL 33525

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: C (X) Change () Addition
Name: SIMMONS, RAY
Address: 34751 ORANGE BELT DRIVE
City-St-Zip: DADE CITY, FL 33523

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: BRADLEY MILLER

T

04/30/2008

Electronic Signature of Signing Officer or Director

Date