

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08161

FILED  
Sep 25, 2009  
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 ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

SINGLETON, DAVY  
37248 CARTER AVE  
DADE CITY, FL 33523 US

**Name and Address of New Registered Agent:**

CALVARY BAPTIST CHURCH  
14312 17TH STREET  
DADE CITY, FL 33523 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: BOBBY RAY SIMMONS

09/25/2009

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: ADDISON, BEA TRUSTEE  
Address: P O BOX 830  
City-St-Zip: DADE CITY, FL 33526

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

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

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: S/D (X) Change ( ) Addition  
Name: SIMMONS, DEBORAH TRUSTEE  
Address: 34751 ORANGE BELT DR.  
City-St-Zip: DADE CITY, FL 33526

Title: D (X) Change ( ) Addition  
Name: ADAMS, MICHAEL TRUSTEE  
Address: 37546 HOWARD AVE.  
City-St-Zip: DADE CITY, FL 33525

Title: D (X) Change ( ) Addition  
Name: ADAMS, LINDA TRUSTEE  
Address: 37546 HOWARD AVE  
City-St-Zip: DADE CITY, FL 33525

Title: C (X) Change ( ) Addition  
Name: SIMMONS, BOBBY R CHAIRMAN  
Address: 34751 ORANGE BELT DR.  
City-St-Zip: DADE CITY, FL 33523

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

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: BOBBY RAY SIMMONS

C

09/25/2009

Electronic Signature of Signing Officer or Director

Date