

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N16208

FILED
Oct 20, 2004
Secretary of State**Entity Name:** CALVARY EVANGELISTIC ASSOCIATION INTERNATIONAL INC.**Current Principal Place of Business:**1925 N.E. 45TH STREET
SUITE 234
FT. LAUDERDALE, FL 33308**New Principal Place of Business:****Current Mailing Address:**1925 N.E. 45TH STREET
SUITE 234
FT. LAUDERDALE, FL 33308**New Mailing Address:****FEI Number:** 65-0000853 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:****Name and Address of New Registered Agent:**VOCE, ALLAN G.S. DR.
1925 N.E. 45TH STREET
FT. LAUDERDALE, FL 33308 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: _____

Electronic Signature of Registered Agent

Date**OFFICERS AND DIRECTORS:****Title:** PC () Delete
Name: VOCE, ALLAN G.S. DR.
Address: 1925 N.E. 45TH STREET, SUITE 234
City-St-Zip: FT. LAUDERDALE, FL 33308**Title:** V () Delete
Name: VOCE, MICHAEL
Address: 1925 N.E. 45TH STREET, SUITE 234
City-St-Zip: FT. LAUDERDALE, FL 33308**Title:** D () Delete
Name: SIMON, RAPHAEL REV.
Address: 1925 N.E. 45TH STREET, SUITE 234
City-St-Zip: FT. LAUDERDALE, FL 33308**Title:** SD () Delete
Name: VOCE, PEARL
Address: 1925 N.E. 45TH STREET, SUITE 234
City-St-Zip: FT. LAUDERDALE, FL 33308**Title:** DM () Delete
Name: RAWLINS, CHRISTIAN REV.
Address: 1925 N.E. 45TH STREET, SUITE 234
City-St-Zip: FT. LAUDERDALE, FL 33308**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**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 for the exemption stated in Section 119.07(3)(i), 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: ALLAN GS VOCE

PC

10/20/2004

Electronic Signature of Signing Officer or Director_____
Date