## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N16515

(1)

## CALVARY CHRISTIAN CHURCH, INCORPORATED

								!				//////////////////////////////////////
Principal Place of Business Mailing Address								ļ '		VIII 91917 VII		11411 4141, 144
9241 SW 55TH COOPER CITY I			9241 SW 55TH STREET COOPER CITY FL 33328-5813									
								3. Date	Incorporated or Qualified 08/26/1986		te of Last F 01/25/19	
2. Principal Pl	ace of Business		2a. Mailing Address 26				50-2702 t22			pplied For lot Applicable		
Suite, Apt.	#, etc	Suite,	Suite, Apt. #, etc.				5. Certificate of Status Desired See Required					
City & State	3	City &	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip Country				Zip Country								
24	25		<u> </u>	29 30		, , , , , , , , , , , , , , , , , , ,			corporation has liability for da Statutes		No No	s. 199.03≥,
24]		Address of Curre							e and Address of New Re			
							Name C	1 1		1		
FORBES, BILLY W.							2		nen W. For	Des	<u> </u>	
	V 55TH STREET	т		8			Street Addre	ss (P.O. B	ox Number is Not Accepta	010) <b>EE</b>		
	R CITY FL 3332		83					W. 33 311	<u> </u>			
COUPER	1 (111 FL 3332	.0										
						84		per	City	FL	११	328
11. Pursuant i office or ri agent I ai	to the provisions egistered pajent, m familiar vith, a	of Sections 617.05 or both, in the Stat or accept the obli	e-named corporations.	ration sub on's board	mits this statement for the of directors. I hereby acce	purpose of pt the app	changing i ointment as	its registered s registered				
	\ 1 \ \ A	// \ // N								<b>132</b> -	97	)
Signature Typediar printed name of registered agent and title it applicable. (NOTE:						d Age	nt signature required			DATE	<del>-1-1</del> -	
12.		OFFICERS A	ND DIRECTORS		13.			ADDI"	TIONS/CHANGES TO OFFI	CERS AND		
TITLE	STD			☐ DELETE	1.1 T	FILE	ļ				Change	Addition (
NAME	FORBESS, I				1.2 N	AME						
STREET ADDRESS	9241 SW 55	ith Street			1.3 \$	TREET	ADDRESS					
CITY - ST - ZIP	COOPER CI	ITY FL			1.40	ITY-S	T-ZIP					
TITLE	PD			DELETE	2.1 T	ITLE					☐ Change	Addition
NAME	Forbess, I	BILLY W.			22 N	IAME						
STREET ADDRESS	9241 SW 55	STH STREET			235	TREET	ADDRESS					
CITY-SI-ZIP	COOPER C	ITY FL		2			2 4 CITY-ST-ZIP					
TITLE	VD			DELETE	3.1 T	ITLE					☐ Change	Addition
NAME	FORBESS, S	stephen W.			3.2 N	AME						
STREET ADDRESS	9241 SW 55	5th Street			3.3 \$	TREET	ADDRESS					
CITY-ST-ZIP	COOPER CI	ITY FL			3.4. (	CITY-S	ST-ZIP					
TITLE				DELETE	4.1 T	ITLE					☐ Change	☐ Addition
NAME					4. 2	NAME						
STREET ADDRESS					4.3 S	TREET	ADORESS					
CITY-ST-ZIP					4.4 0	HTY-S	T- ZIP					,
TITLE				DELETE		ITLE					Change	Addition
NAME					5.2 N	IAME						
STREET ADDRESS					5.3 S	TREET	ADDRESS					
CITY - ST - ZIP	)				5.4 0	ATY-\$	I-71P					
TITLE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		DELETE		ITLE					Change	Addition
NAME					62 N	IAME						
STREET ADDRESS					6.3.5	TREET	ADDRESS					

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 justee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 mornings. For on an attactment with an address.

SIGNATURE:

ALE AND TYPED ON ADMITED NAME OF SIGNING OFFICER OR DIRECTOR

2-22-97 (954)434-3000

**FILED** 

Mar 05 1997 8:00am

Secretary of State