

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17273

FILED
Jan 22, 2009
Secretary of State

Entity Name: CALVARY CHAPEL, TALLAHASSEE INC.

Current Principal Place of Business:

8614 MAHAN DRIVE
TALLAHASSEE, FL 32309 US

New Principal Place of Business:

Current Mailing Address:

8614 MAHAN DRIVE
TALLAHASSEE, FL 32309 US

New Mailing Address:

FEI Number: 59-2697628

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOTTINGHAM, KENT
5424 PACES MILL ROAD
TALLAHASSEE, FL 32308 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: T () Delete
Name: STRAUSS, FRED
Address: 1694 MCCOOK ROAD
City-St-Zip: QUINCY, FL 32351

Title: ST () Delete
Name: WILLIAMS, STEPHEN
Address: 2991 GOLDEN EAGLE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: PD () Delete
Name: NOTTINGHAM, KENT
Address: 5424 PACES MILL RD.
City-St-Zip: TALLAHASSEE, FL 32308

Title: T () Delete
Name: BROWN, BLAINE
Address: 1239 STONY CREEK WAY
City-St-Zip: TALLAHASSEE, FL 32317

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: DRAUGHON, MARTA
Address: 6745 CROOKED CREEK ROAD
City-St-Zip: TALLAHASSEE, FL 32311

Title: D (X) Change () Addition
Name: WILLIAMS, STEPHEN
Address: 2991 GOLDEN EAGLE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: PP (X) Change () Addition
Name: NOTTINGHAM, KENT
Address: 5424 PACES MILL RD.
City-St-Zip: TALLAHASSEE, FL 32308

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

Title: MGRM () Change (X) Addition
Name: DEAN, JAMES
Address: 1902 DOOMAR DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

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: KENT NOTTINGHAM

PP

01/22/2009

Electronic Signature of Signing Officer or Director

Date