## 2008 NOT-FOR-PROFIT CORPORATION ÄNNUAL REPORT (AR)

## DOCUMENT # N27093



**FILED** Jan 31, 2008 08:00 AI Secretary of State

Entity Name MT. CALVARY SOUTHERN BAPTIST CHURCH, INC.		
Principal Place of Business	Mailing Address	
5300 BERRYHILL RD MILTON FL 32570	P.O. BOX 709 MILTON FL 32572	
2. Principal Place of Business - No P.O. Box #	3. Mailing Address	
Suite, Apt. #. etc.	Suite, Apt. #, etc.	



1st MOORE CR2E037 (10/07) City & State Applied For City & State 4. FEI Number 59-3197639 No: Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JUDD, JOHNNY Street Address (P.O. Box Number is Not Acceptable) 5426 BERRYHILL ROAD MILTON FL 32570 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorioa. I am familiar with, and accept the obligations of registered agent Signature, typed or printed name of registered agent and title if an pilosele DATE (NOTE: Ran stated Agent compares and used when constating): FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2008 Added to Fees Florida Department of State vinkin ili brightrefister su 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change SAEBORN, RUTHERFORD NAME U00000808515 02/07/08-80052-010 61.25 3624 BRIGHTWOOD LANE STREET ADDRESS STREET ADDRESS **PACE FL 32571** CITY-ST-ZIP CITY-ST-ZIP TiTLE ☐ Delete TITLE ☐ Change Addition HART, DAVID NAME 5755 ALLENTOWN RD. STREET ADDRESS STREET ADDRESS MILTON FL 32570 CITY-ST-ZIP CITY-ST-ZIP TITLE IST ☐ Delete TITLE ☐ Change noilibtA 🔲 NAME PRICE, MIKE JR NAME 5600 NORTHROP RD STREET ADDRESS STREET ADDRESS CITY-ST-Z-P MILTON FL 32570 CITY-ST-ZIF TIFLE Delete TITLE ☐ Change Addition | JUDD, JOHNNY NAME NAME STREET ADDRESS 5426 BERRYHILL ROAD STREET ADDRESS CITY-ST-ZIP MILTON FL 32570 CITY-ST-ZiP CD ☐ Delete TITLE TITLE ☐ Change Addition PRICE, MIKE 6107 ANDERSON LANE STREET AUDRESS STREET ACCURESS MILTON FL 32570 CITY-ST-ZIP CITY-ST-ZiP TITLE Delete TITLE Change ☐ Addition WALDROP, KEN NAME NAME 5450 PINE BARRON RD STREET ADDRESS STREET ADDRESS

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 requiremental 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 requiremental report is true and accurate and that my name appears in Block 10 or Block 11 of the corporation or the red if changed, or on an attachr ient with ∕an address, with all other like

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

MILTON FL 32570

-28-08