

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N27570

1. Entity Name
SPRING HILL CALVARY CHURCH OF THE NAZARENE,
INC.



Principal Place of Business
235 COBBLESTONE DRIVE
SPRING HILL, FL 34606

Mailing Address
P.O. BOX 6588
SPRING HILL, FL 34611

FILED
Jun 20, 2005 8:00 am
Secretary of State

06-20-2005 90002 049 ****61.25

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2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

06142005

Chg-NP

CR2E037 (10/03)

City & State

City & State

4. FEI Number

59-2962423

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DUNCAN, M. EVELYN
11384 KINGSWAY CT
SPRINGHILL, FL 34609

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP
DUNCAN, EVELYN
11384 KINGSTREE CT
SPRING HILL, FL 34609 ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP
PEPIN, DEBIE
11153 SHEFFIELD STREET
SPRING HILL, FL 34608 ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP
CHAPIN, BEVERLY
610 HOLLY ST.
BROOKSVILLE, FL 34601 ☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☒ Addition
Jerry Buckley
7221 Toledora
Spring Hill, FL 34606

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

12. I 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 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

M. Evelyn Duncan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
M. EVELYN DUNCAN

6/15/05

Date

352-797-9330

Daytime Phone #