

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32290

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** CALVARY CHAPEL OF ORLANDO, INC.

**Current Principal Place of Business:**

4025 EDGEWATER DR.  
ORLANDO, FL 32804 US

**New Principal Place of Business:**

5015 GODDARD AVE.  
ORLANDO, FL 32804 US

**Current Mailing Address:**

P.O. BOX 150189  
ALTAMONTE SPRINGS, FL 327150189 US

**New Mailing Address:**

5015 GODDARD AVE.  
ORLANDO, FL 32804 US

FEI Number: 59-3011410

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ALLEN, GIB  
623 HERMITS TRAIL  
ALTAMONTE SPRINGS, FL 32701 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: PD  
Name: ALLEN, GIB  
Address: 623 HERMITS TRAIL  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D  
Name: KATTELMANN, JIM  
Address: 3953 SOUTH WARDELL PL.  
City-St-Zip: ORLANDO, FL 32814

Title: D/TR  
Name: HARPER, TOM  
Address: 1225 RUNNING OAK LN.  
City-St-Zip: WINTER GARDEN, FL 34787

I hereby 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 all other like empowered.

SIGNATURE: TOM HARPER

TREA

04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date