

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36054

FILED
Mar 11, 2009
Secretary of State

Entity Name: MOUNT CALVARY FREE WILL BAPTIST CHURCH, INC.

Current Principal Place of Business:

710 W CINCINNATI AVE
DELAND, FL 327207210

New Principal Place of Business:

Current Mailing Address:

710 W CINCINNATI AVE
DELAND, FL 327207210

New Mailing Address:

FEI Number: 59-2986730

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DAVENPORT, CLARENCE C.
710 W CINCINNATI AVE
DELAND, FL 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: D (X) Delete
Name: BRIGHT, WILLIE L.,
Address: 336 W EUCLID AVE
City-St-Zip: DELAND, FL

Title: D () Delete
Name: DAVENPORT, CLARENCE, C.
Address: 903 S ADELLE AVE
City-St-Zip: DELAND, FL

Title: D () Delete
Name: HILL, JEROME,
Address: 803 S CLARA AVE
City-St-Zip: DELAND, FL

Title: T () Delete
Name: CAINE, GEORGE
Address: 1075 E WISCONSIN AVE
City-St-Zip: DELAND, FL 32724

Title: T () Delete
Name: ASHLEY, DARCELL T
Address: 525 W EUCLID AVE
City-St-Zip: DELAND, FL 32720

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: CLARENCE C. DAVENPORT

D

03/11/2009

Electronic Signature of Signing Officer or Director

Date