


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 06, 2007 8:00 am**  
**Secretary of State**

02-06-2007 90009 020 \*\*\*\*61.25

<b>DOCUMENT # N44331</b>	
1. Entity Name <b>CALVARY UNITED METHODIST CHURCH, INC.</b>	

Principal Place of Business <b>112 BLANDING BOULEVARD ORANGE PARK, FL 32073</b>	Mailing Address <b>112 BLANDING BOULEVARD ORANGE PARK, FL 32073</b>
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**DO NOT WRITE IN THIS SPACE**



01102007 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>59-2267669</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>HALE, RONALD</b> <b>591 CHARLES CARROLL STREET</b> <b>ORANGE PARK, FL 32073-5040</b>	<i>C. Ronald Coleman</i> <i>577 Golden Links Dr</i> <i>Orange Park, FL 32073</i>
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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 <i>C. Ronald Coleman</i>	<i>C. Ronald Coleman</i>	DATE <i>1-11-07</i>
<small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		

<b>Filing Fee is \$61.25 Due by May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR START, RAY 2915 MARION CT ORANGE PARK, FL 32065
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR CARTER, ERIC 7368 IRONSIDE DRIVE JACKSONVILLE, FL 32244
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR <i>C. Ronald Coleman</i> <b>HALE, RONALD</b> <b>591 CHARLES CARROLL STREET</b> <b>ORANGE PARK, FL 32073-5040</b> <i>577 Golden Links Dr</i> <i>Orange Park, FL</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR <i>Ed Little</i> <b>STOREY, WAYNE</b> <b>6 FOX VALLEY</b> <b>ORANGE PARK, FL 32073</b> <i>8 Fox Valley</i> <i>Orange Park FL 32073</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR LANDIS, DELORIS 295 HOLLIS DR E ORANGE PARK, FL 32073
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR YOUNG, JERRY 1684 VILLAGE WAY ORANGE PARK, FL 32073

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.			
<b>SIGNATURE:</b> <i>C. Ronald Coleman</i>	<i>C. Ronald Coleman</i>	DATE <i>1-11-07</i>	DAYTIME PHONE # <i>904-272-2478</i>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	<small>Daytime Phone #</small>