

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N45534

1. Corporation Name

CALVARY CHAPEL OF PENSACOLA, INC.

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

6330 ANTIETAM DRIVE PENSACOLA FL 32503

21

6330 ANTIETAM DRIVE PENSACOLA FL 32503

2a. Mailing Address

Suite, Apt. #, etc,

26

FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90015 001 ****70.00



3. Date Incorporated or Qualifed

10/07/1991

4. FEI Number

22 10,460	motley Ct.	27 10,460 Motley C	⊁,		59-3088147	No	t Applicable	
City & State	ate City & State				5. Certificate of Status Desired	\$8.75 A	Additional	
23 Pens	Isacola, FL 28 Pensacola, FL				3. Certificate of Status Desired	Fee Required		
Zip	Country Zip Co		Country	untry 6. Election Campaign Financing		\$5.00	May Be	
24 32514	25	29 32514 30			Trust Fund Contribution	Added to	o Fees	
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
			81	Name				
HUGHES, I. G., JR.				Street	Address (P.O. Box Number is Not Acceptable)			
6330 ANTIETAM DRIVE								
PENSACOLA FL 32503								
				City	_	85 Zip C	Code	
			84	City	F	·L ••		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered								
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.								
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when relinstating) DATE								
12.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE .	0.		1.1 TITLE			Change	Addition	
NAME	110-01120, 11-01, 011		1.2 NAME					
STREET ADDRESS	6330 ANTIETAM DR.		1.3 STREET ADDRESS					
CITY-ST-ZIP	PENSACOLA FL		1.4 CITY-ST-ZIP		211 32503			
TITLE .	DV	☐ DELETE	2.1 TITLE	ļ		Change	Addition	
NAME	SIRMON, BRADLEY D 22		2.2 NAME					
STREET ADDRESS	101 /// 110021110 1101		2.3 STREET	ADDRESS			-	
CITY-ST-ZIP			2.4 CITY-ST	r-ziP				
TITLE	DS	☐ DELETE	3.1 TITLE	ļ		Change	☐ Addition	
NAME	rational distribution of		3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST	r-ziP				
TITLE	DT	₽ DELETE 4.1 T			DT / MAST // T	Change	☐ Addition	
NAME	VIETZKE, BOB		4.2 NAME La		Larry Leroy M& Fall, Jr. 40-6 Hatch Rd NAS			
STREET ADDRESS	2213 KINGFISHER COURT 433		4.3 STREET	ADDRESS	40-6 Hatch Rd NAS			
CITY-ST-ZIP	PENSACOLA FL		4.4 CITY-ST	-ZIP	Pensacola, FL. 32508			
TITLE	, DELETE		5.1 TITLE			Change	Addition	
NAME			52 NAME	1			ľ	
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP	5.4		5.4 CITY-ST	-ZIP				
TITLE		☐ DELETE 6.1 T				☐ Change	☐ Addition	
NAME	6.2 N		6.2 NAME	1			4	
STREET ADDRESS			6.3 STREET	ADDRESS		•		
CITY-ST-ZIP			6.4 CITY-ST	-ZIP			(
14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information								

14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if changed, or, or, an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/79 (850) 494-125 (

CR2E037 (11/98)

Applied For