

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90297 007 ****70.00

DOCUMENT # N45534

1. Entity Name

CALVARY CHAPEL OF PENSACOLA, INC.

Principal Place of Business

10.460 MOTLEY CT.
 PENSACOLA FL 32514

Mailing Address

10.460 MOTLEY CT.
 PENSACOLA FL 32514

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3088147

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HUGHES, I. G., JR.
6330 ANTIETAM DRIVE
PENSACOLA FL 32503

7. Name and Address of New Registered Agent

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.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE **DP** Delete
 NAME **HUGHES, I.G., JR.**
 STREET ADDRESS **6330 ANTIETAM DR.**
 CITY-ST-ZIP **PENSACOLA FL**

TITLE **DV** Delete
 NAME **SIRMON, BRADLEY D**
 STREET ADDRESS **461 W. ROBERTS RD.**
 CITY-ST-ZIP **CANTONMENT FL 32533**

TITLE **DS** Delete
 NAME **SHERWOOD, BILL**
 STREET ADDRESS **1813 NESTLE DR**
 CITY-ST-ZIP **PENSACOLA FL 32534**

TITLE **DT** Delete
 NAME **WILMOTH, NOEL**
 STREET ADDRESS **1872 BAY OAKS CIR**
 CITY-ST-ZIP **MILTON FL 32583**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME **DS**
 STREET ADDRESS **Todd Stanton**
 CITY-ST-ZIP **4526 Southpointe Lane Pensacola, FL 32514**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

I. G. Hughes, Jr.
SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/02

Date

(850) 494-1256

Daytime Phone #

CR2E037 (9/01)