

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N46289

1. Entity Name

CALVARY MISSION, INC.

Principal Place of Business

5022 COLONIAL AVENUE
JACKSONVILLE FL 32210

Mailing Address

5022 COLONIAL AVENUE
JACKSONVILLE FL 32210

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

MALLORY, ALFRED
5022 COLONIAL AVENUE
JACKSONVILLE FL 32210

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

After September 13, 2000 min. will be \$236.25

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 PD ☐ Delete
NAME MALLORY, ALFRED
STREET ADDRESS 5022 COLONIAL AVENUE
CITY-ST-ZIP JACKSONVILLE FL 32210

TITLE SD ☒ Delete
NAME WRIGHT, LAWRENCE
STREET ADDRESS 1012 W. 40TH STREET
CITY-ST-ZIP SAVANNAH GA 31402

TITLE TD ☒ Delete
NAME LEWIS, JOHN
STREET ADDRESS 5800 ALTAMA AVE #7
CITY-ST-ZIP BRUNSWICK GA

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 SECRETARY ☒ Change ☐ Addition
NAME DAVID N. HART
STREET ADDRESS 6702 LONGMEADOW CIR
CITY-ST-ZIP JACKSONVILLE FL 32244

TITLE TREASURER ☒ Change ☐ Addition
NAME COREY F. ANTONIO
STREET ADDRESS 4300 COMMUNITY DR APT. 1605
CITY-ST-ZIP WEST PALM BEACH FL 33409

TITLE BOARD DIRECTOR ☐ Change ☒ Addition
NAME DR. GREGORY HUNTER
STREET ADDRESS 88 S. BLANDING BLVD
CITY-ST-ZIP ORANGE PK FL 32073

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Aug 02, 2000 8:00 am
Secretary of State

08-02-2000 90155 046 ****61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

CR2E037 (5/00)