

**2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Apr 07, 2014  
Secretary of State**

DOCUMENT# N46289

Entity Name: CALVARY MISSION, INC.

**Current Principal Place of Business:**

5022 COLONIAL AVENUE  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

5022 COLONIAL AVENUE  
JACKSONVILLE, FL 32210

**New Mailing Address:**

FEI Number: 59-3100840      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MALLORY, ALFRED  
5022 COLONIAL AVENUE  
JACKSONVILLE, FL 32210      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: ALFRED MALLORY

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PTSD  
Name: MALLORY, ALFRED  
Address: 5022 COLONIAL AVENUE  
City-St-Zip: JACKSONVILLE, FL 32210

I hereby 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 all other like empowered.

SIGNATURE: ALFRED MALLORY

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

MR.

04/07/2014

\_\_\_\_\_  
Date