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FILED

May 13 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS**DOCUMENT # N51018 (2)**

1. Corporation Name

**CALVARY CHRISTIAN CENTER ASSEMBLY OF GOD OF CITR
US COUNTY, INC.**

Principal Place of Business

Mailing Address

**PO BOX 1313
HERNANDO FL 34442****PO BOX 1313
HERNANDO FL 34442-1313**3. Date Incorporated or Qualified
09/25/19923a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

4. FEI Number
59-3070584Applied For
Not Applicable5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**6. Election Campaign Financing
Trust Fund Contribution ☐**\$5.00 May Be
Added to Fees**8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**COOK, PHILIP J
930 STANFORD TERRACE
INVERNESS FL 34450**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE**PD
COOK, PHILIP J
930 STANFORD TERRACE
INVERNESS FL**TITLE ☐ DELETE**VD
YOUNG, MICHAEL
5903 NORTH OAK MOUNT DR.
BEVERLY HILLS FL 34465**TITLE ☒ DELETE**STD
THERIAULT, RENO
3341 N. SUNROSE PATH
BEVERLY HILLS FL 34465**TITLE ☒ DELETE**D
WILSENS, JOSEPH
8450 E. S.W. 90TH ST.
OCALA FL 34481**TITLE ☐ DELETENAME
STREET ADDRESS
CITY - ST - ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition**STD
Lacey, Dale
340 N. Cornish Point
Lecanto, FL 34461**1.2 NAME ☐ Change ☒ Addition**D
Strickland, David
4742 E. Spruce Dr.
Dunnellon, FL 34434**1.3 STREET ADDRESS ☐ Change ☒ Addition**D
Marchese, William
6828 S. Live Oak Dr.
Floral City FL, 34436**1.4 CITY - ST - ZIP ☐ Change ☐ Addition4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP5.1 TITLE ☐ Change ☐ Addition5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP6.1 TITLE ☐ Change ☐ Addition6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **X** **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # **0066184**

CR2E037 (9/96)