

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # N51018

1. Entity Name
**CALVARY CHRISTIAN CENTER ASSEMBLY OF GOD OF
CITRUS COUNTY, INC.**



Principal Place of Business
**2728 E HARLEY ST
INVERNESS, FL 34453**

Mailing Address
**2728 E HARLEY ST
INVERNESS, FL 34453**



01122007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3070584

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**RAIRICK, MICHAEL T
352 N. MANOR WAY
LECANTO, FL 34461**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting) DATE

**Filing Fee Is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD RAIRICK, MICHAEL T 352 N MANOR WAY LECANTO, FL 34461 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D JUSE, DANN 6389 E. GRANTHAM COURT 12 WEST GOLDEN ST BEVERLY HILLS, FL 34465 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T MERCER, GEORGE 2091 N. CROFT AVE HERNANDO, FL 34442 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D TAYLOR, DAVID 281 OLYMPIA ST. HERNANDO, FL 34442 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S FISHER, THOMAS 826 EAST GAINES LN HERNANDO, FL 34442 |

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01/31/07-80038-001 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: George Mercer 1-20-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #