

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003312

FILED
Jan 10, 2006
Secretary of State

Entity Name: CALVARY CHURCH, INC.

Current Principal Place of Business:

7432 E. HWY 50
GROVELAND, FL 34736 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 120038
CLERMONT, FL 34712 US

New Mailing Address:

FEI Number: 59-3250107

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPRESTO, ANTHONY H VP
18301 S. O'BRIEN RD.
GROVELAND, FL 34736 US

Name and Address of New Registered Agent:

THOMAS, ROBERT M P
13211 VIA ROMA CR.
CLERMONT, FL 34711 US

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: ROBERT M. THOMAS II

01/10/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: LOPRESTO, ANTHONY H
Address: 18301 S. O'BRIEN RD.
City-St-Zip: GROVELAND, FL 34736 US

Title: S/D () Delete
Name: ARCHAMBAULT, TIFFANY R
Address: 9454 WATER FERN CIRCLE
City-St-Zip: CLERMONT, FL 34711 US

Title: D (X) Delete
Name: EDGINGTON, PHILIP A
Address: 11038 CRESCENT BAY BLVD
City-St-Zip: CLERMONT, FL 34711 US

Title: D () Delete
Name: GANT, JAMES
Address: 6601 ROSE ST
City-St-Zip: GROVELAND, FL 34736 US

Title: D () Delete
Name: NEWSOME, ROBERT
Address: 12701 BRUCE HUNT ROAD
City-St-Zip: CLERMONT, FL 34711 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: TIFFANY ARCHAMBAULT

S/D

01/10/2006

Electronic Signature of Signing Officer or Director

Date