## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000003312

City-St-Zip:

Entity Name: CALVARY CHURCH, INC.

FILED Apr 23, 2007 Secretary of State

		,			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
7432 E. HWY 50 GROVELAND, FL 34736 US		7432 E. HWY 50 104, 105, 106 GROVELAND, FL 34736 US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX CLERMON	120038 NT, FL 34712	US			
FEI Number	: 59-3250107	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
13211 VIÁ	ROBERT M P ROMA CR. NT, FL 34711	US			
	named entity s e of Florida.	ubmits this statement for the	purpose of changing its register	ed office or registered agent, or both	
SIGNATU	RE:				
	Electroni	ic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	VP ( ) Delete LOPRESTO, ANTHONY H 18301 S. O'BRIEN RD. GROVELAND, FL 34736 US		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S/D ( ) Delete ARCHAMBAULT, TIFFANY R 9454 WATER FERN CIRCLE CLERMONT, FL 34711 US		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete GANT, JAMES 6601 ROSE ST GROVELAND, FL 34736 US		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () NEWSOME, RO 12701 BRUCE F CLERMONT, FL	IUNT ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	( )	Delete		( ) Change (X) Addition	

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.

City-St-Zip:

CLERMONT, FL 34711 US

SIGNATURE: TIFFANY ARCHAMBAULT S 04/23/2007