

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003312

FILED  
May 16, 2009  
Secretary of State

Entity Name: CALVARY CHURCH, INC.

## Current Principal Place of Business:

7432 E. HWY 50  
104, 105, 106  
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 (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

THOMAS, ROBERT M P  
13211 VIA ROMA CR.  
CLERMONT, FL 34711 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: \_\_\_\_\_

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

Title: P ( ) Delete  
Name: THOMAS, ROBERT M P  
Address: 13221 VIA ROMA CR.  
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:

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT M. THOMAS

P

05/16/2009

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

\_\_\_\_\_  
Date