

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2006 8:00 am
Secretary of State

03-24-2006 90030 001 ****61.25

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1. Entity Name
CALVARY CHRISTIAN FELLOWSHIP, INC.



Principal Place of Business
3266 SOUTHSIDE BLVD
JACKSONVILLE, FL 32216 US

Mailing Address
3266 SOUTHSIDE BLVD
JACKSONVILLE, FL 32216 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03202006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-3304525

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

JOHNSON, ANDREW PAUL
12358 SHELL BEACH TRAIL
JACKSONVILLE, FL 32246

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME JOHNSON, ANDREW P
STREET ADDRESS 12358 SHELL BEACH TRAIL
CITY-ST-ZIP JACKSONVILLE, FL 32246 ☐ Delete

TITLE VTD
NAME TURNER, MICHAEL S
STREET ADDRESS 20 CEDARWOOD CT.
CITY-ST-ZIP PALM COAST, FL 32137 ☒ Delete

TITLE D
NAME CORNETT, TIM E
STREET ADDRESS 7760 GREENWICH CT E
CITY-ST-ZIP JACKSONVILLE, FL 32277 ☐ Delete

TITLE D
NAME HENDERSON, ROBERT W
STREET ADDRESS 159 11TH STREET
CITY-ST-ZIP ATLANTIC BEACH, FL 32233 ☐ Delete

TITLE D
NAME ARSENAULT, RICHARD K
STREET ADDRESS 2307 COVINGTON CREEK CIR E
CITY-ST-ZIP JACKSONVILLE, FL 32224 ☐ Delete

TITLE SD
NAME MATHIS, SCOTT A
STREET ADDRESS 3471 NEWCASTLE CREEK DR
CITY-ST-ZIP JACKSONVILLE, FL 32277 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VTD
NAME Edgar, Richard O
STREET ADDRESS 12356 Burgess Hill Circle S
CITY-ST-ZIP Jacksonville, FL 32246 ☐ Change ☒ Addition

TITLE D
NAME Laforge, Victor L
STREET ADDRESS 2307 Covington Creek Circle E
CITY-ST-ZIP Jacksonville, FL 32224 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Richard O. Edgar RICHARD O. EDGAR

3-20-06

904-928-1067

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #