

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Mar 27, 2007
Secretary of State

DOCUMENT# N95000004959

Entity Name: CALVARY CHAPEL OF THE PALM BEACHES, INC.**Current Principal Place of Business:**6227 W. GUN CLUB ROAD
WEST PALM BEACH, FL 33415 US**New Principal Place of Business:****Current Mailing Address:**6227 W. GUN CLUB ROAD
WEST PALM BEACH, FL 33415 US**New Mailing Address:****FEI Number:** 65-0618379**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**NELSON, DARYL
133 HERON PARKWAY
ROYAL PALM BEACH, FL 33411 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:** D () Delete
Name: NELSON, DARYL
Address: 133 HERON PARKWAY
City-St-Zip: ROYAL PALM BEACH, FL 33411**Title:** D () Delete
Name: NELSON, AIMEE
Address: 133 HERON PARKWAY
City-St-Zip: ROYAL PALM BEACH, FL 33411**Title:** D () Delete
Name: OSBORNE, SEAN
Address: 3518 CHESAPEAKE CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33436**Title:** D () Delete
Name: ROBERTS, DUANE
Address: 5406 LITTLE DIPPER CT.
City-St-Zip: GREENACRES, FL 33463**Title:** D () Delete
Name: JOHN, HOWARD
Address: 11165 MARINA BAY ROAD
City-St-Zip: WELLINGTON, FL 33467**Title:** () Delete
Name:
Address:
City-St-Zip:**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:**Title:** D () Change (X) Addition
Name: PLOURDE, DAN
Address: 12925 159TH CT
City-St-Zip: JUPITER, FL 33478

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: DARYL NELSON

D

03/27/2007

Electronic Signature of Signing Officer or Director

Date