2000 UNIFORM BU	ISINESS REPOI	RI (OBK)		T 711	DD		
DOCUMENT # N9600003281 1. Entity Name				FILED Jan 26, 2000 8:00 am Secretary of State 01-26-2000 90004 003 ****61.25			
CALVARY CHAPEL TREASURE COAST, INC.							
Principal Place of Business	Mailing Address			01 2 0 2 000 7000		- · · <u>-</u> ·	
533 SE NOME DR PORT ST LUCIE FL 34984 US							
Ų0	00	24		BIR 18118 BILLI 88111 88111 88111 88111			
2. Principal Place of Business 10698 S. Federal Hwy. Suite, Apt. #, etc. 3. Mailing Address 10698 S. Federal Hwy. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
Port St. Lucie FL	City & State Port St. Lvc	Port St. Lucie, FL.		4. FEI Number 59-3461787 Applied For Not Applicable			
Zip Country (5	34 9 52	Country US	5. Certificate	of Status Desired	\$8.75 Add Fee Require		
6. Name and Address of Cur			7. Name and	Address of New Registere	d Agent	-	
		Name	SAMI	<u> </u>			
DALTON, LOGAN Street Address (ess (P.O. Box Numbe	r is Not Acceptable)	•		
3500 N COURTENAY PARKWAY							
MERRITT ISLAND FL 32953					T= 0		
		. City		F	L Zip Cod	e	
8. The above named entity submits this statement	ent for the purpose of changing its re	egistered office or reg	istered agent, or bot	h, in the state of Florida.	*		
			11				
COUNTY LOGAN S, Da	Hon Lone	an St.	to 1	Pastor /-	/2 -	<i>つ</i> ひ	
SIGNATURE Signature of registered	agent and title if applicable. DOTE:	Registered Agent signature re-	quired when reinstating)	DATI		<u>_</u>	
	//		<u></u>				
FILE NOW: 9. Election Campaign Financing			5.00 May Be Make Check Payable to				
FEE IS \$61.25	Trust Fund Contribut	íon. Lí Á	dded to Fees	Departme	nt of State		
10. OFFICERS ANI	D DIRECTORS	11.	ADDITIONS/CHA	L ANGES TO OFFICERS AND	DIRECTORS IN	10	
TITLE PSD	☐ Delete	TITLE	reasurer	FLOEK	☐ Change	Addition	
NAME DALTON, LOGAN		NAME 3	oe bulo	Ha Trace Cicela	orchang	re From	
STREET ADDRESS 3500 N COURTENAY PARKW	VAY N. I. L. C. J.	STREET ADDRESS 31	517 S.W. Jun	set Trace Circle	Tom Ho	1665 to 8	
CITY-ST-ZIP MERRITT ISLAND FL 32953	Address Change		alm City Fl	34970		-, è	
TITLE TD	≥ Delete	NAME 56	om Ande	- ELDEK	☐ Change	Addition C	
NAME HOBBS, TOM STREET ADDRESS 3500 N COURTENAY PARKW				Drive	malcoli	Kwild Ho	
MERRITT-ISLAND: FL-32953	CITY_ST-ZIP_	+ Pierce-1	21-349-82	Tom A	derson?		
TITLE SD	Delete	TITLE	To the state		☐ Change	Addition	
NAME WILD, MALCOLM	,	NAME				,	
STREET ADDRESS 3500 N COURTENAY PARKW	/AY	STREET ADDRESS CITY-ST-ZIP					
CITY-ST-ZIP MERRITT ISLAND FL 32953		<u> </u>	1000	· <u></u>	Change	Addition	
NAME TO STATE THE	☐ Delete	TITLE A	IDER	ual ton	☐ Change	Addition	
STREET ADDRESS		STREET ADDRESS 3	ave McNa 209 S.E. O	Pis Ln.		}	
CITY-ST-ZIP		CTY-ST-ZIP A	rt St. Luc	re FL, 34984			
TITLE SECTOR A	☐ Delete	HILE P	SD - PAS	TOR	Change	☐ Addition	
NAME				715	•	}	
STREET ADDRESS CITY-ST-ZIP	•	OUTS 4 OT 710	33 SENOM	ie FL. 34984			
· · · · · · · · · · · · · · · · · · ·		100	At Stirre	1e ru, 17789	☐ Change	☐ Addition	
TITLE NAME	· Delete	TITLE NAME			change	☐ Wod((in))	
STREET ADDRESS		STREET ADDRESS					
CITY-ST-ZIP		CITY-ST-ZIP]	
12. I hereby certify that the information supplied indicated on this report or supplemental rep	with this filing does not qualify for t	he exemption stated i	in Section 119.07(3)(), Florida Statutes. I further	certify that the in	nformation	

1-12-00 561-785-6273