

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004800

FILED
Feb 27, 2006
Secretary of State

Entity Name: CALVARY CHAPEL OF VERO BEACH, INC.

Current Principal Place of Business:

P.O. BOX 650585
VERO BEACH, FL 32965

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 650585
VERO BEACH, FL 32965

New Mailing Address:

FEI Number: 65-0697096

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLAGHER, P. JAMES
2090 SPRING PLACE
VERO BEACH, FL 32963 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: PD () Delete
Name: GALLAGHER, P. JAMES
Address: P.O. BOX 650585
City-St-Zip: VERO BEACH, FL 32965

Title: D () Delete
Name: CHAFFIN, RICH
Address: 9451 WINDRIFT LN
City-St-Zip: ELK GROVE, CA 95758

Title: T () Delete
Name: OCHSNER, MICHAEL
Address: 6580 FORRESTER DRIVE
City-St-Zip: MARBLE FALLS, AR 72648

Title: D () Delete
Name: BROWN, JOESPH
Address: 116 15 AVENUE
City-St-Zip: VERO BEACH, FL 32962

Title: D () Delete
Name: ONARATO, ANTHONY
Address: 3225 3RD ST
City-St-Zip: VERO BEACH, FL 32968

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: T (X) Change () Addition
Name: OCHSNER, MICHAEL B
Address: 130 WATERWAY LANE
City-St-Zip: VERO BEACH, FL 32963

Title: S (X) Change () Addition
Name: BROWN, JOESPH
Address: 116 15 AVENUE
City-St-Zip: VERO BEACH, FL 32962

Title: D (X) Change () Addition
Name: HENNESSEY, RICHARD
Address: 4508 5TH MANOR SW
City-St-Zip: VERO BEACH, FL 32968

Title: D () Change (X) Addition
Name: MILTON, DAVID
Address: 3945 62ND AVE.
City-St-Zip: VERO BEACH, FL 32966

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: MICHAEL B. OCHSNER

T

02/27/2006

Electronic Signature of Signing Officer or Director

Date