

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000005024

**FILED**  
**Feb 13, 2012**  
**Secretary of State**

**Entity Name:** CALVARY CHAPEL FELLOWSHIP OF HERNANDO COUNTY INC.

**Current Principal Place of Business:**

5155 COMMERCIAL WAY HWY.  
SPRING HILL, FL 34606

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5197  
SPRING HILL, FL 34611

**New Mailing Address:**

**FEI Number:** 59-3415017

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ANDRUSS, MATTHEW  
4213 CASKIE PLACE  
BROOKSVILLE, FL 34604 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  
Name: ANDRUSS, MATTHEW  
Address: 5155 COMMERCIAL WAY  
City-St-Zip: SPRING HILL, FL 34606

Title: VD  
Name: MORRISON, LEE  
Address: 5155 COMMERCIAL WAY  
City-St-Zip: SPRING HILL, FL 34606

Title: STD  
Name: HOLM, MICHAEL  
Address: 5155 COMMERCIAL WAY  
City-St-Zip: SPRING HILL, FL 34606

Title: D  
Name: BALDWIN, WAYNE  
Address: 5155 COMMERCIAL WAY  
City-St-Zip: SPRING HILL, FL 34606

I hereby 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 all other like empowered.

SIGNATURE: MATTHEW ANDRUSS

PD

02/13/2012

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

\_\_\_\_\_  
Date