2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000716

Entity Names CALVARY CHAREL OF OCAL

FILED Apr 30, 2007 Secretary of State

Entity Nai	me: CALVAR	Y CHAPEL OF OCALA, INC.				
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
212 S. MA OCALA, FI	GNOLIA AVE. L 34474					
Current M	lailing Addres	ss:	New Maili	New Mailing Address:		
P.O. BOX OCALA, FI						
FEI Number: 59-3426713 FEI Number Applied For () FE			FEI Number Not App	Number Not Applicable () Certificate of Status Desired ()		
Name and	Address of C	Current Registered Agent:	Name and	Address of I	New Registered Agent:	
EWING, R 212 S. MA OCALA, FI	GNOLIA AVE.	3				
	named entity e of Florida.	submits this statement for the բ	ourpose of changing i	ts registered o	office or registered agent, or both,	
SIGNATUR	RE:					
	Electror	nic Signature of Registered Age	ent	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PSTD (EWING, RODN 6043 SE 126TH BELLEVIEW, F	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (ROSADO, ISRA 22408 OVERTU BOCA RATON,	JRE CR.	Title: Name: Address: City-St-Zip:	D (X MOORE, JASO 4777 E MARSH HERNANDO, F	H LAKE DR	
Title: Name: Address: City-St-Zip:	D (O'BLENIS, FRE 9060 SW 91ST OCALA, FL 34	CIRCLE	Title: Name: Address: City-St-Zip:	D (X LEE, RICKY 18765 SW 471 DUNNELLON,		
Title: Name: Address: City-St-Zip:	D (POLAK, TIM 1119 SE 32ND OCALA, FL 34		Title: Name: Address: City-St-Zip:	D (X POLAK, TIM 4 CHERRY DR OCALA, FL 34		
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	D (NICHOLS, COI 10965 SE 45TI BELLEVIEW, F	H AVENUE	

I hereby certify that the information supplied with this filing does not qualify 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: RODNEY E EWING P 04/30/2007