2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# N97000002645

Entity Name: CALVARY RESTORATION MINISTRIES, INC.

Current Principal Place of Business:

715 S.W. 7TH TERRACE
DANIA, FL 33004

New Principal Place of Business:

Current Mailing Address:

715 S.W. 7TH TERRACE
DANIA, FL 33004

New Mailing Address:

FEI Number: 65-0757206 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FRANKS, DUANE LEON
2315 ATLANTA STREET
HOLLYWOOD, FL 33020 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:	FRANKS, DEGRANDO SR	
Address:	2315 ATLANTA ST.	
City-St-Zip:	HOLLYWOOD, FL 33020	
Title:	D	( ) Delete
Name:	DELEVOE, HOSEA A JR.	
Address:	2164 NW 20TH ST.	
City-St-Zip:	FT. LAUD., FL 33311	
Title:	D	( ) Delete
Name:	ADDERLEY, WILLIAM A SR	
Address:	3521 NW 9 CT	
City-St-Zip:	FT LAUDERDALE, FL 33311	
Title:	D	( ) Delete
Name:	SAUNDERS, HAYWARD W	
Address:	2610 NW 42 AVE.	
City-St-Zip:	LAUDERHILL, FL 33313	
Title:	P/D	( ) Delete
Name:	FRANKS, DUANE L	
Address:	2315 ATLANTA STREET	
City-St-Zip:	HOLLYWOOD, FL 33020	
Title:	V/D	( ) Delete
Name:	SMITH, ANDREW B	
Address:	287 SW 8 STREET	
City-St-Zip:	DANIA, FL 33004	

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:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM A. ADDERLEY, SR. D 04/29/2005

Electronic Signature of Signing Officer or Director — Date