

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006425

FILED
Jan 05, 2005
Secretary of State

Entity Name: CALVARY EMERALD COAST, INCORPORATED

Current Principal Place of Business:

407 RACETRACK ROAD NE
FORT WALTON BEACH, FL 32547 US

New Principal Place of Business:

Current Mailing Address:

407 RACETRACK ROAD NE
FORT WALTON BEACH, FL 32547 US

New Mailing Address:

FEI Number: 59-3480244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLANDERS, JAMES T
714 REVERE AVE.
FORT WALTON BEACH, FL 32547 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: FLANDERS, JAMES
Address: 714 REVERE AVE.
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: VD () Delete
Name: DOE, EDWARD
Address: 6112 E. BAY BLVD
City-St-Zip: GULF BREEZE, FL 32561

Title: STD () Delete
Name: HENLEY, REID M
Address: 26 MAGNOLIA AVE
City-St-Zip: SHALIMAR, FL 32579

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: BLACKMON, JAMES A
Address: 1086 BLVD. DE LA PARISIENNE
City-St-Zip: MARY ESTHER, FL 3269

Title: STD (X) Change () Addition
Name: HENLEY, REID M
Address: 1934 KADIMA CIRCLE
City-St-Zip: FORT WALTON BEACH, FL 32547

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: JAMES T. FLANDERS

PD

01/05/2005

Electronic Signature of Signing Officer or Director

Date