2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N97000007156

1. Entity Name
CALVARY CHAPEL CHURCH INC



FILED Feb 19, 2008 8:00 am Secretary of State 02-19-2008 90018 025 ****61.25

CALVARI	CHAPLE CHOROH, INC.								
2401 W CYPRESS CREEK RD		Mailing Address 2401 W CYPRESS CREE FT LAUDERDALE, FL 3		• , . •					
2. Principal P	face of Business - No P.O. Box #	3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			02052008 _{CI}	ng-NP	CR2E037 (1	2/06)	
City & State	• • • • • • • • • • • • • • • • • • •	City & State			4. FEI Number 65-087983	5			plied For
Zip	Country	Žip	Country		6. Certificate of St			75 Addi Required	itional
	6. Name and Address of Current	Registered Agent	<u> </u>		7. Name and Add	ress of New Rog			
DAVIS, MA			Name				· · · · · · · · · · · · · · · · · · ·		
2401 W CY	PRESS CREEK RD RDALE, FL 33309		Street	Address (i	P.O. Box Number is	Not Acceptable)			
FILAUDE	RDALE, PE 33309								
			City				FL	Zip Code	,
	named entity submits this statement fo	r the purpose of changing its	registered office	or register	red agent, or both, in	the State of Florid	da. I am famil	iar with,	and accept
the obligat	ions of registered agent.								
SIGNATURE.	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E- Registered Agent sign	nature required	d when reinstating)		DATE		
SIGNATURE .	Signature, typed or printed name of registered agent					Mal			
SIGNATURE .	Signature, typed or printed name of registered agent. Filling Fee is \$61.25 Due by May 1, 2008		npaign Financing		\$5.00 May Be Added to Fees		DATE ke check pa la Departme	•	
SIGNATURE .	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DIR	9. Election Car Trust Fund (npaign Financing		\$5.00 May Be	Florid	ke check pa la Departme	nt of St	ate 10
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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313	147		_

MANKET. DOWN, VICE HESTOANK SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #