2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2008
Secretary of State

DOCUMENT# N98000000015

Entity Name: CALVARY CHAPEL OF FORT MYERS, INC.

Current Principal Place of Business:

867 BETHANY COURT S.
FORT MYERS, FL 33919

New Principal Place of Business:

103 N. DEL PRADO BLVD
12
CAPE CORAL, FL 33990

Current Mailing Address:

P.O. BOX 60626
FORT MYERS, FL 33906

New Mailing Address:

FEI Number: 65-0799815 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JENNINGS, WILLIAM C
867 BETHANY COURT S.
FORT MYERS, FL 33919 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: DP ( ) Delete
Name: JENNINGS, WILLIAM C
Address: 867 BETHANY COURT S.
City-St-Zip: FORT MYERS, FL 33919

Title: DV ( ) Delete
Name: FREDRICH, CHRIS
Address: 2759 RIDGE HAVEN DR.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: DS/T ( ) Delete
Name: MUELLER, MARK
Address: 2833 NW 6TH PLACE
City-St-Zip: CAPE CORAL, FL 33993

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DS (X) Change ( ) Addition
Name: MILAKEVE, HARRY
Address: 19250 N TAMIAMI TRAIL I-3
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: DT ( ) Change (X) Addition
Name: CUOLLO, MIKE
Address: 807 SW 56TH STREET
City-St-Zip: CAPE CORAL, FL 33914

Title: D ( ) Change (X) Addition
Name: MUELLER, MARK
Address: 2833 NW 6TH PLACE
City-St-Zip: CAPE CORAL, FL 33993

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: WILLIAM C. JENNINGS DP 03/20/2008
Electronic Signature of Signing Officer or Director — Date