

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005368

FILED  
May 17, 2007  
Secretary of State

**Entity Name:** LIGHT OF CALVARY EAST COAST CHURCH, INC.

**Current Principal Place of Business:**

540 NORTH DIXIE FREEWAY  
NEW SMYRNA BEACH, FL 32168

**New Principal Place of Business:**

2923 WOODLAND DR.  
EDGEWATER,, FL 32141

**Current Mailing Address:**

540 NORTH DIXIE FREEWAY  
NEW SMYRNA BEACH, FL 32168

**New Mailing Address:**

2923 WOODLAND DR.  
EDGEWATER,, FL 32141

**FEI Number:** 52-2183763      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

KAMMER, PAUL  
2923 WOODLAND DR.  
EDGEWATER,, FL 32141      US

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: KAMMER, PAUL  
Address: 2923 WOODLAND D.  
City-St-Zip: EDGEWATER, FL 32141

Title: VPD      ( ) Delete  
Name: THOMAS, SULLIVAN  
Address: 623 E. MINESOTA AVE.  
City-St-Zip: DELAND, FL 32274

Title: SD      ( ) Delete  
Name: ROBIN, SULLIVAN  
Address: 623 E. MINESOTA AVE.  
City-St-Zip: DELAND, FL 32274

Title: VPD      ( ) Delete  
Name: VICTORIA, DEDERING  
Address: 1829 DATE PLAM DR.  
City-St-Zip: EDGEWATER, FL 32132

Title: VPD      ( ) Delete  
Name: DENNIS, DEDERING  
Address: 1829 DATE PLAM DR.  
City-St-Zip: EDGEWATER, FL 32132

Title: VPD      ( ) Delete  
Name: SHEILA, KAMMER  
Address: 2923 WOODLAND DR.  
City-St-Zip: NEW SMYRNA BEACH, FL 32141

**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: VPD      (X) Change ( ) Addition  
Name: GEORGE, GALLOWAY  
Address: 3314 TAMARIND DR.  
City-St-Zip: EDGEWATER, FL 32141

Title: VPD      (X) Change ( ) Addition  
Name: JODI, GALLOWAY  
Address: .3314 TAMARIND DR  
City-St-Zip: EDGEWATER, FL 32141

Title: VPD      (X) Change ( ) Addition  
Name: SHEILA, KAMMER  
Address: 2923 WOODLAND DR.  
City-St-Zip: EDGEWATER, FL 32141

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: PAUL KAMMER

DIRE

05/17/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date