

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003124

Entity Name: CALVARY CHAPEL OF KENDALL, INC.**Current Principal Place of Business:**16435 SW 117TH AVENUE
MIAMI, FL 33177**Current Mailing Address:**16435 SW 117TH AVENUE
MIAMI, FL 33177**FEI Number:** 65-1099676**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GARCIA, PEDRO P
16435 SW 117TH AVENUE
MIAMI, FL 33177 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**Officer/Director Detail :**

Title	PD
Name	GARCIA, PEDRO
Address	16435 SW 117TH AVENUE
City-State-Zip:	MIAMI FL 33177

Title	TD
Name	DAVIDSON, TIM
Address	16435 SW 117TH AVENUE
City-State-Zip:	MIAMI FL 33177

Title	DIRECTOR
Name	FRANQUIZ, ROBERT
Address	16435 SW 117TH AVENUE
City-State-Zip:	MIAMI FL 33177

Title	SD
Name	SHANK, ROBERT
Address	16435 SW 117TH AVENUE
City-State-Zip:	MIAMI FL 33177

Title	D
Name	MION, LUIS
Address	16435 SW 117TH AVENUE
City-State-Zip:	MIAMI FL 33177

Title	D
Name	TCHIVIDJIAN, STEPHAN
Address	16435 SW 117TH AVENUE
City-State-Zip:	MIAMI FL 33177

Title	DIRECTOR
Name	NG, ABE
Address	16435 SW 117TH AVENUE
City-State-Zip:	MIAMI FL 33177

I hereby 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 all other like empowered.

SIGNATURE: LUIS MION**DIRECTOR****03/11/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date