FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 705721

1. Corporation Name

EVANGELICAL COVENANT CHURCH OF ROYAL PALM BEACH, INC.

Principal Place of Business 660 ROYAL PALM BEACH BLVD. ROYAL PALM BEACH FL 33411 Mailing Address

660 ROYAL PALM BEACH BLVD. ROYAL PALM BEACH FL 33411

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90109 035 ****61.25

- 1 18 128 88 5 8 1		BART RERITALAN RIBIL IRBI

2. Principal PI	ce of Business 2a. Mailing Address 26		3. Date Incorporated or Qualifed 06/05/1963						
Suite, Apt.	#. etc	Suite, Apt. #, etc.			4. FEI Number		Apr	olied For	
22	, - -	27	•		59-1563158		Not	Applicable	
City & State			5. Certificate of Status Desired S8.75 Additional Fee Required						
Zip	Country	Zip			6. Election Campaign Finar	ncina —	\$5.00	May Be	
24	25	29 30	ז		Trust Fund Contribution	. • 11	Added to		
24	9. Name and Address of Current Registered Agent				10. Name and Address of I		Agent		
			81						
NICHOLO ERECH				Donald Bush					
1			82	82 Street Address (P.O. Box Number is Not Acceptable) 11682 49th. Street North					
775 CARISSA DR			83		<u> </u>				
HUTAL PA	ILM BEACH FL 33411								
	•		84	City	oyal Palm_Beach	` FL	85 Zip C	ode 411	
11 0	to the provisions of Sections 617.0502	and 617 1509 Elorida Statutos	the abov	no hemen-e	poration submits this statement for				
office or n	egistered agent or both, in the State of	Florida. Such change was auth	iorized dv	the corpora	ition's board of directors. I bereby	accept the appo	intment as rec	jistered	
agent. I ai	m familiar with, and accept the obligation	ns of, Section 617.0503, Flord	Statutes	. /	082	- 2/1	8/00		
SIGNATURE	Donald Bush, Cha			rue	Sum		0/1/		
	Signature, typed or printed name of registered agent a OFFICERS AND		13.	nt signature requ	ired when reinstating) ADDITIONS/CHANGES T	O OFFICERS A	ND DIRECTO	RS IN 12	
12.		DIRECTORS TO DELETE	1.1 TITLE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change	Addition	
TITLE	SD	M perrie	ł				_	_ (
NAME	LARSON, BEVERLY		1.2 NAME					Ĭ	
STREET ADDRESS	2362 EDGEWATER DRIVE			T ADDRESS	•			ļ	
CITY-ST-ZIP	WEST PALM BEACH FL	- December	1.4 CITY-S	iT-ZIP			. Change	Addition	
TITLE	PD	☐ DELETE	2.1 TITLE		VD & SD		X onlings		
NAME	NICHOLS, EILEEN		2.2 NAME					1	
STREET ADDRESS	775 CARISSA DR		2.3 STREE	TADDRESS				1	
CITY-ST-ZIP	ROYAL PALM BEACH FL 33411		2.4 CITY-1	ST-ZIP .		·		- Addition	
TITLE	TD	☐ DELETE	3.1 TTTLE				Change	Addition	
NAME	RICHARDSON, JAMES M		3.2 NAME					-	
STREET ADDRESS	103 SWAN PARKWAY WEST		3.3 STREE	TADDRESS		•		[
CITY-ST-ZIP	ROYAL PALM BEACH FL		3.4. CITY-	ST-ZIP					
TITLE	VD .	· 🔲 DELETE	4.1 TITLE		PD		X Change	☐ Addition	
NAME	BUSH, DONALD		4. 2 NAME						
STREET ADDRESS	11682 49TH ST N		4.3 STREE	TADDRESS					
CITY-ST-ZIP	ROYAL PALM BEACH FL 33411		4.4 CITY-S	ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition	
NAME	,		5.2 NAME			•			
STREET ADDRESS	•		5.3 STREE	TADDRESS		•		ĺ	
CITY-ST-ZIP			5.4 CITY-5	ST-ZIP	•	<u> </u>			
TITLE		☐ DELETE	6.1 TITLE		,		☐ Change	☐ Addition	
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREE	TADDRESS					
CITY+ST-7IP	·		6.4 CITY-5	ST-ZIP					

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

PURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/99 56-793-3260