2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: Monda

May 23, 2005 8:00 am Secretary of State **DOCUMENT # 705721** 1. Entity Name 05-23-2005 90001 022 ****70 00 ROYAL PALM COVENANT CHURCH, INC. Mailing Address Principal Place of Business 660 ROYAL PALM BEACH BLVD. ROYAL PALM BEACH FL 33411 660 ROYAL PALM BEACH BLVD. ROYAL PALM BEACH FL 33411 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State 4. FEI Number Applied For City & State 59-1563158 Not Applicable Country 7ip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ROSE, MICHAEL Street Address (P.O. Box Number is Not Acceptable) 660 ROYAL PALM BEACH BLVD. **ROYAL PALM BEACH FL 33411** City Zip Code 8. 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. / am familiar with, and accept the obligations of registered and SIGNATURE Sanature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Due By May 1, 2005 Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11 TITLE Delete TITLE ∑ Change ☐ Addition FERNIN-DAVIS, RHONDA NAME NAME 2131 F ROAD STREET ADDRESS STREET ADDRESS LOXAHATCHEE FL 33470 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Treasure es ☐ Change X Addition SHIM, MARSHA Alduthe Morrison NAME NAME 1113 OAK WATER DRIVE STREET ADDRESS STREET ADDRESS 660 ROYAL PARM BEACH ROYAL PALM BEACH FL 33411 CITY - ST - ZIR CITY-ST-ZIP 38411 VICE CHAIRMAN APAS Delete K Change Addition DASTOR LESTER WARREN FERGUSON, CLENORD NAME 2478 LAKE DEBRA DRIVE #12307 STREET ADDRESS STREET ADURESS 905 South "L"Street CITY-ST-ZIP ORLANDO FL 32835 CITY-ST-ZIP Lake Worth , FL 33460 <u>Secretory</u> ☐ Delete TITLE ☐ Addition ROSE, CAROLYN NAME Carolin Rose 229 PONCE DE LEON ST STREET ADDRESS STREET ADDRESS 135 Meadow land Drive ROYAL PALM BEACH FL 33411 CITY-ST-ZIP CITY-ST-ZIP Koyal Holm Beach, FL 33411 TITLE ☐ Change ☐ Defete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE T Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. 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 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

Ques KHONDH FERRIN- LANS

FILED

561-793-1079