FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

Principal Place of Business

SIGNATURE: _

731322

(4)

Mailing Address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF FIGURE DIRECTOR

EVANGELICAL COVENANT CHURCH OF VENICE ISLES, INC

513 CERVINA VENICE FL 3 US			513 Cervina dr., n Venice Fl. 34292 Us							
							3. Date Incorporated or Qualified 3a. 12/05/1974	Date of Le 02/23		
	ace of Business		2a. Mailing Address			***	4. FEI Number		Applied For	
21			26				59-1574630		Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State			City & State			7011 IV.	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip	L-1	Country	Zip Country				8. This corporation has liability for intangible tax under s. 199.032,			
24	0 Name and	25 29 30 and Address of Current Registered Agent					Florida Statutes			
	9. Name and	Address of Current	Hegistered Agent	8	1 [Name	10. Name and Address of New Registers	d Agent		
OUDN (CADI			Ľ	1	TNOTTIE				
OHRN, CARL 108 VIA VENETO					2	Street A	Address (P.O. Box Number is Not Acceptable)			
	FL 34292			8:	3					
VEHICL	TL 34282				۱					
				8-	4	City	F	85	Zip Code	
11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office.										
or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.										
SIGNATURE										
12.		OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.			ADDITIONS/CHANGES TO OFFICERS A		TORS IN 12	
TOLE	CD		[]DELETE	1.1 TITLE	-			Chang	e Addition	
NAME	OHRN, CAP			1.2 NAME	E				_	
STREET ADDRESS	108 VIA VE	– . –		1.3 STREE	ET A	ADDRESS				
CITY-S1-ZIP	VENICE FL	34292		1.4 CITY-	-ST	- ZIP				
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NAME	SCHELL, ES			2.2 NAME	E					
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NAME	BITTNER, B			3.2 NAME	E					
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NAME				52 NAME	Ē				-	
STREET ADDRESS				5 3 STREE	et a	ADDRESS				
CITY-ST-ZIP			Filori ere	5.4 CITY-		-ZIP				
TITLE			DELETE	61 TITLE				☐ Change	e 🔲 Addition	
NAME DYSSEL LEDGERG				6.2 NAME						
STREET ADORESS				6.3 STREE						
City-St-ZiP	or cortify that the	information supplied ad	th this filipp is yet into the 4	6.4 City-	ST-	-ZiP	ify for the exemption stated in Section 119.07(3)(k),			
certify that oath; that	t the information i I am an officer or	indicated on this annua r director of the corpora	l report or supplemental annu	iai report is ti empowered	ri ka	and acc	iny for the exemption stated in Section 119.07(3)(k), ourate and that my signature shall have the same lego this report as required by Chapter 617, Florida Sta	al offect or	r Marsado unador I	