2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#731322

FILED Apr 29, 2005 Secretary of State

Entity Name: EVANGELICAL COVENANT CHURCH OF VENICE ISLES, INC.

Current Principal Place of Business: New Principal Place of Business: 204 MANTUA DRIVE VENICE, FL 342854309 US **Current Mailing Address: New Mailing Address:** 204 MANTUA DRIVE VENICE, FL 342854309 US FEI Number: 59-1574630 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STONE, WILLIAM L 204 MANTUA DRIVE VENICE, FL 342854309 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: CD () Delete (X) Change () Addition SMITH, JAMES KEYS, DONALD Name: Name: 831 JOLANDA CIRCLE Address: 791 GRADO DRIVE Address: City-St-Zip: VENICE, FL 34286 City-St-Zip: VENICE, FL 34285 Title: TD Title: (X) Change () Addition () Delete WATKINS, JOHN Name: ANDERSON, MARGE Name: Address: 793 BAVENO DR Address: 800 BAVENO DR City-St-Zip: VENICE, FL 34292 City-St-Zip: VENICE, FL 34285 Title: () Delete Title: SD (X) Change () Addition WESTERS, JANET KIDDON, HELEN Name: Name: 789 GRADO DRIVE 208 MANTUA DRIVE Address: Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: VENICE, FL 34285 Title: TD () Delete Title: TD (X) Change () Addition OLDFORD, JABE Name: Name: OLDFORD, JANE 785 CERVINA DRIVE Address: Address: 785 CERVINA DRIVE City-St-Zip: VENICE, FL 34285 City-St-Zip: VENICE, FL 34285 Title: () Delete Title: () Change () Addition NYGAARD, RICHARD Name: Name: 963 JOLANDA CIRCLE Address: Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: Title: () Delete Title: () Change () Addition PARTON, JAMES Name: Name: Address: 941 NETTUNO DRIVE Address: VENICE, FL 34285 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILLIAM L. STONE PASR 04/29/2005