2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744143

FILED Mar 19, 2004 Secretary of State

Entity Name: COVENANT LIFE CHRISTIAN CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 4545 N.W. 103RD AVE. SUNRISE, FL 33351 **Current Mailing Address: New Mailing Address:** 4545 N.W. 103RD AVE. SUITE 100 SUNRISE, FL 33351 FEI Number: 59-2471090 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: MAS, JIMMY 5200 N. W. 65TH AVENUE LAUDERHILL, FL 33319 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: () Change () Addition () Delete MAS. JIMMY Name: Name: 5200 N. W. 65TH AVENUE Address: Address: City-St-Zip: LAUDERHILL, FL 33319 City-St-Zip: Title: VD Title: VD (X) Change () Addition () Delete LEWIS, DAVID Name: MAS, RAYMOND L Name: Address: 9279 N.W. 45TH ST. Address: 3830 NW 91ST TERRACE City-St-Zip: TAMARAC, FL 33321 City-St-Zip: SUNRISE, FL 33351 Title: STD () Delete Title: TD (X) Change () Addition MAS, TERESA A MAS, TERESA A Name: Name: 9651 NW 49TH CT. 5200 NW 65TH AVENUE Address: Address: City-St-Zip: SUNRISE, FL City-St-Zip: LAUDERHILL, FL 33319 Title: VD () Delete Title: SD (X) Change () Addition Name: MAS, RAYMOND L Name: HURLEY, MARGARET Address: 11741 N.W. 35 STREET Address: 4030 NW 54TH COURT City-St-Zip: SUNRISE, FL 33323 City-St-Zip: COCONUT CREEK, FL 33073 Title: () Delete Title: (X) Change () Addition HURLEY, MARGARET LICHTMAN, ALAN Name: Name: 4030 NW 54 CT. 3885 SIENNA GREENS TERRACE Address: Address: City-St-Zip: COCONUT CREEK, FL 33073 City-St-Zip: LAUDERHILL, FL 33319 Title: () Delete Title: () Change () Addition TRAPANI, SALVATORE Name: Name: Address: 6313 BROOKWOOD BLVD. Address: TAMARAC, FL 33321 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: TERESA A. MAS TD 03/19/2004

RALPH VOGEL, DIRECTOR 500 SALEM LANE GIBSONIA, PA 15044