

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010233

**FILED**  
**Apr 15, 2012**  
**Secretary of State**

**Entity Name:** ARK OF THE COVENANT GLOBAL MINISTRIES, INC.

**Current Principal Place of Business:**

3819 N. MAIN ST  
JACKSONVILLE, FL 32206 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 440967  
JACKSONVILLE, FL 32222 US

**New Mailing Address:**

FEI Number: 26-3599704

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

THOMPSON, LINDA  
12449 E TROPIC DRIVE  
JACKSONVILLE, FL 32225 US

**Name and Address of New Registered Agent:**

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:**

Title: P  
Name: THOMPSON, LINDA  
Address: 12449 E TROPIC DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: VP  
Name: LATHERS, TONY SR.  
Address: PO BOX 440967  
City-St-Zip: JACKSONVILLE, FL 32222 US

Title: A  
Name: ALLEN, KJERSTI  
Address: PO BOX 441526  
City-St-Zip: JACKSONVILLE, FL 32222 US

Title: A  
Name: YOUNGBLOOD, JESSICA  
Address: PO BOX 440967  
City-St-Zip: JACKSONVILLE, FL 32222 US

I hereby 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 all other like empowered.

SIGNATURE: LINDA THOMPSON

P

04/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date