

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

Amended Annual Report 1997

FILED

97 NOV 25 AM 11:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N08266**

1. Corporation Name
New Covenant Fellowship, Inc.
385 N. Singleton Ave.
Titusville, Fl. 32796

Principal Place of Business Mailing Address

385 N. Singleton Ave. Same
Titusville, Fl. 32796

3. Date incorporated or Qualified	3a. Date of Last Report
3/20/1985	1997
4. FEI Number	Applied For
59-2741792	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
Country	Country
24	29
25	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Charles Hall
2765 Guil Dr.
Mims Fl: 32754

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City
	400002360634--2	-12702797--01050--006	****61.25 ****61.25
		FL	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 Iota Charles Hall 8/22/97
Signature, typed or printed name of registered agent and title if applicable (Not Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TREASURER Lloyd Clough, Jr. 2120 N. Singleton Ave. Mims, Fl. 32754	<input checked="" type="checkbox"/> DELETE
PRESIDENT Charles Hall 2765 Guil Dr. Mims Fl. 32754	<input type="checkbox"/> DELETE
VICE PRESIDENT Mickael Holt 2915 Knox McRae Dr. Titusville, Fl. 32780	<input type="checkbox"/> DELETE
SECRETARY Bill Lites 970 Parlermo Dr. Titusville, Fl. 32780	<input type="checkbox"/> DELETE
DIRECTOR Randy Seale 1415 Crest Dr.	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or Supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Iota Charles Hall Date: 8/22/97
407-269-4267

CR2E037 (9/96)