


**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 12, 2004 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # N08266 1. Entity Name NEW COVENANT FELLOWSHIP, INC. |  |
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|---|---|
| Principal Place of Business 385 NO. SINGLETON AVE TITUSVILLE, FL 32796 US | Mailing Address 385 NO. SINGLETON AVE TITUSVILLE, FL 32796 US |
|---|---|



01052004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

| | |
|--|-------------------------------|
| 4. FEI Number 59-2741792 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

DIAZ, ORLANDO
6620 SOUTH FORK ROAD
TITUSVILLE, FL 32780

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when remaining) _____ DATE _____

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

| 10. OFFICERS AND DIRECTORS | |
|----------------------------|------------------------|
| TITLE | VD |
| NAME | LUTH, DAVID |
| STREET ADDRESS | 3050 SANDALWOOD LANE |
| CITY - ST - ZIP | TITUSVILLE, FL 32780 |
| TITLE | D |
| NAME | CROUSE, DWAYNE |
| STREET ADDRESS | 3800 MT. VERNON AVENUE |
| CITY - ST - ZIP | TITUSVILLE, FL 32780 |
| TITLE | STD |
| NAME | LITES, WILLIAM |
| STREET ADDRESS | 970 PARLERMO DR. |
| CITY - ST - ZIP | TITUSVILLE, FL 32780 |
| TITLE | D |
| NAME | FOOTE, FRED |
| STREET ADDRESS | 1511 GULDAHL DRIVE |
| CITY - ST - ZIP | TITUSVILLE, FL 32780 |
| TITLE | PD |
| NAME | DIAZ, ORLANDO |
| STREET ADDRESS | 6620 SOUTH FORK ROAD |
| CITY - ST - ZIP | TITUSVILLE, FL 32780 |
| TITLE | D |
| NAME | ROBERTSON, ALEXANDER |
| STREET ADDRESS | 3300 KENTUCKY STREET |
| CITY - ST - ZIP | TITUSVILLE, FL 32796 |

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IN THIS SPACE**

000000002970
01/13/04-80036-011 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: W.J. Lites **W.J. LITES, SEC.** 1/8/04 321-268-8340

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #