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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **N94000002748 (1)**

1. Corporation Name
THE NEW COVENANT TEMPLE, CORP.

700001475437
-05/04/95--01030--004
*****70.00 *****70.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
P.O. BOX 49255 SARASOTA FL 34230	P.O. BOX 49255 SARASOTA FL 34230

3. Date Incorporated or Quashed 06/02/1984	3a. Date of Last Report
4. FEI Number 65-0500658	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees	
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status YES <input checked="" type="checkbox"/> \$68.75 Supplemental Fee Not Required	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

21. Principal Place of Business I DO NOT HAVE A BUILDING AS YET. I AM IN THE FUND-RAISING PROCESS.	2a. Mailing Address SAME AS ABOVE
22. City & State SARASOTA, FL	27. City & State P. O. Box 49255
23. Zip 34230	28. City & State Sarasota, Fla. 34230
24. Zip 34230	29. Zip 34230
25. Country	30. Country SARASOTA

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
HAMMELL, MARGARET	MARGARET HAMMELL	THERE IS NO NEW AGENT	
1777 18th St. #205	P. O. Box 49255		
SARASOTA, FLA. 34234	SARASOTA, FLA. 34230		
		501(c)(3) #23-7259357	
		FL	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *Margaret Hammell* DATE **4/8/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	REV. MARGARET HAMMELL FOUNDER-DIRECTOR 1777 18th St. #205, Sarasota 34234	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP	Essie Jenkins (TRUSTEE) 306 Big Richard Road Tallahassee, Fla. 32310 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DEBORAH HATCHER, SEC/TREAS. RT. 1, BOX 68 TALLAHASSEE, FLA. 32312	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP	Tessie McCallum (TRUSTEE) 1545 Sparrow Road Tallahassee, Fla. 32310 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DEBORAH LIVES WHERE THERE ARE NO NAMED STREETS. SHE LIVES ON HORSESHOE PLANTATION	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP	Susie York (TRUSTEE) P. O. Box 691 (707 Morgan Ave.) Chattahoochee, Fla. 32310 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	XXX XXX XXXXXX I will retain legal services as I get further along in my Church Project.	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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: *Margaret Hammell* DATE **4/8/95** **813-953-5864**