2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT #716296 COVENANT PRESBYTERIAN CHURCH OF OVIEDO, INC.

44032899 Principal Place of Business Mailing Address 1231 REFORMATION DR. 1231 REFORMATION DR. OVIEDO, FL 32765 US OVIEDO, FL 32765 US 3. Mailing Address P. O. Box 309 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 01112004 Cha-NP CR2E037 (10/03) City & State City & State 4. FEI Number Applied For FL 59-1404353 Goldenrod Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box 32733-030⁹ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LEIGH, RICHARD A 1031 W. MORSE BLVD. Street Address (P.O. Box Number is Not Acceptable) STE 350 WINTER PARK, FL 32789 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be Due by May 1, 2004 - Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITUE Delete TITLE Addition ☐ Change FITZGERALD, JIM NAME NAME 5586 LIGUSTRUM LOOP STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OVIEDO, FL 32765 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition LANPHEAR, RON NAME 9865 LAKE GEORGIA DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32817 CITY-ST-ZIP TITLE Delete TITLE Addition BEATES, MIKE NAME NAME STREET ADDRESS 3043 NICHOLSON DRIVE STREET ADDRESS WINTER PARK, FL 32792 CITY - ST - ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Addition BEAVER, TIMOTHY NAME NAME STREET ADDRESS 13135 LAKE LIVE OAK DRIVE STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32817 CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition WILLIS, SCOTT NAME NAME STREET ADDRESS 2825 CENDENA CORE STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32817 CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition LEIGH, RICHARD NAME NAME 2121 SHADY HILL TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-7IP WINTER PARK, FL 32792 CITY-ST-ZIP

12. I 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 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:

Minor Serre MICHAEL S. BEATES SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIF