

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08266

**Entity Name:** NEW COVENANT FELLOWSHIP, INC.

**Current Principal Place of Business:**

705 HARRISON ST  
TITUSVILLE, FL 32780

**Current Mailing Address:**

705 HARRISON ST  
TITUSVILLE, FL 32780 US

**FEI Number:** 59-2741792

**Certificate of Status Desired:** No

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

ROBERTSON, BRIENNE  
705 HARRISON STREET  
TITUSVILLE, FL 32780 US

*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:** BRIENNE ROBERTSON

02/14/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	VD	Title	DIRECTOR
Name	STONE, HOWARD	Name	MCCLELLAN, CRAIG
Address	2755 DONNA DRIVE	Address	1180 BAYMEADOWS DR.
City-State-Zip:	TITUSVILLE FL 32796	City-State-Zip:	TITUSVILLE FL 32796
Title	PASTOR	Title	TREASURER
Name	ROBERTSON, ALEXANDER	Name	ROBERTSON, BRIENNE
Address	3300 KENTUCKY STREET	Address	2425 LARKWOOD RD
City-State-Zip:	TITUSVILLE FL 32796	City-State-Zip:	TITUSVILLE FL 32780
Title	DIRECTOR	Title	SECRETARY
Name	HOLT, MICKAEL	Name	DANIHER, MARTHA
Address	2915 KNOX MCRAE DRIVE	Address	1326 LARK COURT
City-State-Zip:	TITUSVILLE FL 32780	City-State-Zip:	TITUSVILLE FL 32780
Title	DIRECTOR		
Name	DANIHER, ANDREW		
Address	1326 LARK COURT		
City-State-Zip:	TITUSVILLE FL 32780		

*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:** BRIENNE ROBERTSON

**TREASURER**

02/14/2017

Electronic Signature of Signing Officer/Director Detail

Date