

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 01, 2006  
Secretary of State**

DOCUMENT# 707088

Entity Name: PALMETTO COMMUNITY COVENANT CHURCH, INC.

**Current Principal Place of Business:**

10300 S. W. 162ND STREET  
MIAMI, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

10300 S. W. 162ND STREET  
MIAMI, FL 33157

**New Mailing Address:**

FEI Number: 59-1357205      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

CAREY, REV E  
11040 SW 172 TERR  
MIAMI, FL 33157      US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: CT      ( ) Delete  
Name: GRANBERRY, DORIS  
Address: 16505 SW 103 CT  
City-St-Zip: MIAMI, FL 0,

Title: ST      ( ) Delete  
Name: RODGERS, SANDRA  
Address: 10300 SW 162 ST  
City-St-Zip: MIAMI, FL

Title: FS      ( ) Delete  
Name: DORSETT, CORA  
Address: 582 NW 11 ST.  
City-St-Zip: FLORIDA CITY, FL 33034

Title: T      ( ) Delete  
Name: ROBINSON, BETTY  
Address: 12320 SW 249TH ST  
City-St-Zip: PRINCETON, FL 33032

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BETTIE J ROBINSON

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

TREA

05/01/2006

\_\_\_\_\_  
Date