

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 18 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 710474 (8)

1. Corporation Name

COVENANT CHURCH PROPERTY HOLDING ASSOCIATION, I
NC.

Principal Place of Business

Mailing Address

1410 DUNDEE RD.
WINTER HAVEN FL 33884-10101410 DUNDEE RD.
WINTER HAVEN FL 33884-10103. Date Incorporated or Qualified
03/07/19663a. Date of Last Report
03/05/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

4. FEI Number

59-6592865

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LIDDON, POTTER
523 W LAKE ELBERT DR
WINTER HAVEN, FL
33880

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DST
SAVANT, WARREN
101 LAKE OTIS RD
WINTER HAVEN, FL 00000 ☐ DELETE1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
DIRECTOR
WAYNE WHEELER
603 14th St. N.E
WINTER HAVEN, FL 33881 ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
LIDDON, POTTER
523 W. LAKE ELBERT DR.
WINTER HAVEN, FL 00000 ☐ DELETE2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
DIRECTOR
CHARLES YOUTSEY
108 OAKRIDGE LANE S.E
WINTER HAVEN, FL 33884 ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
JONES, DAN
117 SHELLEY DR
WINTER HAVEN FL ☐ DELETE3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
CARNES, GARY
1600 ISLAND WAY
WINTER HAVEN FL ☒ DELETE4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
SWEET, JAMES
10 BRODGEN CT. S.E.
WINTER HAVEN FL ☒ DELETE5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
WAYNE WHEELER ☐ DELETE6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
☐ Change ☐ Addition

14. I do 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
WARREN E. SAVANT

Date

Daytime Phone # 0064841

CR2E037 (9/96)

3-1-97