

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90167 041 ****61.25

DOCUMENT # 710474

1. Entity Name

COVENANT CHURCH PROPERTY HOLDING ASSOCIATION, I
NC.

Principal Place of Business

1410 DUNDEE RD.
WINTER HAVEN FL 33884-1010

Mailing Address

1410 DUNDEE RD.
WINTER HAVEN FL 33884-1010

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-6592865

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

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

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME MAROTTI, ROBERT ☐ Delete
STREET ADDRESS 12500 OLD GRADE RD
CITY-ST-ZIP POLK CITY FL 33868

TITLE S-T-D
NAME DAVE COLLINS ☐ Change ☒ Addition
STREET ADDRESS 115 BUCHANAN RD
CITY-ST-ZIP WINTER HAVEN FL 33884

TITLE D
NAME SWEET, JAMES ☐ Delete
STREET ADDRESS 10 BRODGEN CT., SE
CITY-ST-ZIP WINTER HAVEN, FL 00000 33880

TITLE D
NAME RICHARD MACCREA ☐ Change ☒ Addition
STREET ADDRESS 3942 THORN HILL RD
CITY-ST-ZIP WINTER HAVEN FL 33880

TITLE D
NAME IRBY, TIM ☐ Delete
STREET ADDRESS 1893 ELOISE LOOP RD
CITY-ST-ZIP WINTER HAVEN FL 33884

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME WAYNE WHEELER ☒ Delete
STREET ADDRESS 603 14TH ST N.E.
CITY-ST-ZIP WINTER HAVEN FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME CHARLES YOUTSEY ☒ Delete
STREET ADDRESS 108 OAKRIDGE LANE SE
CITY-ST-ZIP WINTER HAVEN FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT K MAROTTI, PD

04/03/2002

863-984-4455

Date

Daytime Phone #

CR2E037 (9/01)