


FILE NOW: FILING FEE IS \$61.25

FILED

May 06 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **711715** (3)

1. Corporation Name

**COMMUNITY COVENANT CHURCH OF ST. PETERSBURG, FLO  
RIDA, INC.**



Principal Place of Business	Mailing Address
4501 30TH AVE NORTH ST PETERSBURG FL 33713	4501 30TH AVE NORTH ST PETERSBURG FL 33713

3. Date Incorporated or Qualified

10/28/1966

4. FEI Number

59-1729242

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

JAYNE, DONALD  
218 DOGWOOD CIRCLE  
SEMINOLE FL 34647

10. Name and Address of New Registered Agent

81 Name

Roger K. Hartmann

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

7711 DOVER COURT North

83

84 City

St. Petersburg

FL

85 Zip Code

33709

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

ROGER K. HARTMANN TREASURER 3/15/98

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	LONGO, AUGUSTUS	
STREET ADDRESS	712 LYNDALE STREET NORTH	
CITY - ST - ZIP	ST. PETERSBURG FL	

TITLE	V	<input type="checkbox"/> DELETE
NAME	VETVICK, NORMAN	
STREET ADDRESS	3822-100TH TERRACE N	
CITY - ST - ZIP	PINELLAS PARK FL	

TITLE	J	<input checked="" type="checkbox"/> DELETE
NAME	JAYNE, DONALD	
STREET ADDRESS	218 DOGWOOD CIRCLE	
CITY - ST - ZIP	SEMINOLE FL	

TITLE	D	<input type="checkbox"/> DELETE
NAME	KRUMM, ROBERT	
STREET ADDRESS	6400-40TH AVE N #2	
CITY - ST - ZIP	ST PETERSBURG FL	

TITLE	S	<input type="checkbox"/> DELETE
NAME	METTETAL, BONNE	
STREET ADDRESS	4801-22ND AVE N	
CITY - ST - ZIP	ST PETERSBURG FL	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	

3.1 TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	ROGER K. HARTMANN	
3.3 STREET ADDRESS	7711 DOVER CT. No.	
3.4 CITY - ST - ZIP	ST. PETERS, FL 33709	

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. 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 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: ROGER K. HARTMANN TRSR. 3/15/98 546-9525

CR2E037 (10/97)