2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#713423

FILED Aug 31, 2005 Secretary of State

Entity Name: THE EVANGELICAL COVENANT CHURCH OF TRI-PAR ESTATES, INC.

Current Principal Place of Business:			New Principal Place of Business:		
	NIDA MADERA TON, FL 34210	US			
Current Mailing Address:			New Mailing Address:		
	NIDA MADERA FON, FL 34210	US			
n accordar	nce with s. 607.193(2)	FEI Number Applied For() FEI I (b), F.S., the corporation did not receivent Registered Agent:	-		
3400 AVE	N, DAVID A. NIDA MADEIRA TON, FL 34210	US			
	e named entity sub e of Florida.	mits this statement for the purpos	e of changing i	ts registered office or registered agent, or both,	
SIGNATU					
Electronic Signature of Registered Agent			Date		
OFFICER	S AND DIRECTO	RS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTOR	
Fitle: Name: Address: City-St-Zip:	VP () De CAMERON, DONAL 5216 OAKLAND HII SARASOTA, FL 34	.D LLS	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	DT () De SANDERS, GERAL 3224 BEL AIR AVE SARASOTA, FL 34	D	Title: Name: Address: City-St-Zip:	() Change () Addition	
Γitle: Name:	D () De WELLER, AUDREY 5013 OAKLAND HII	,	Title: Name: Address:	() Change () Addition	
	SARASOTA, FL 34		City-St-Zip:		
Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip:		234 lete NUE		()Change ()Addition	
City-St-Zip: Fitle: Name: Address:	SARASOTA, FL 34 S () De BISHOP, EVELYN 5134 BEL-AIR AVE	234 lete NUE 234 lete NUE	City-St-Zip: Title: Name: Address:	() Change () Addition P (X) Change () Addition ELOWSON, DAVID 3400 AVENIDA MADERA BRADENTON, FL 34210	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID ELOWSON P 08/31/2005