## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#714838** 

FILED Feb 06, 2009 Secretary of State

Entity Name: PRESBYTERIAN CHURCH OF THE COVENANT, INC., P.C.(U.S.A.)

**Current Principal Place of Business: New Principal Place of Business:** 7950 SOUTH TAMIAMI TRAIL SARASOTA, FL 342316846 **Current Mailing Address: New Mailing Address:** 7950 SOUTH TAMIAMI TRAIL SARASOTA, FL 342316846 FEI Number: 59-1960058 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BREMER, JUDITH 7950 S. TAMIAMI TR SARASOTA, FL 34231 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LEWIS, KATHRYN Name: Name: 6419 CANARY ST Address: Address: City-St-Zip: SARASOTA, FL 34241 City-St-Zip: Title: Title: () Delete () Change () Addition Name: MINER, TOM Name: Address: 2493 BREAKWATER CIRCLE Address: City-St-Zip: SARASOTA, FL 34232 City-St-Zip: Title: () Delete Title: () Change () Addition BREMER, JUDITH Name: Name: Address: 9542 FOREST HILLS CIR. Address: City-St-Zip: SARASOTA, FL 34238 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition MANSPERGER, LINDA Name: Name: PRATT, JAMES D 4609 OAK FOREST DR E. 1216 N. CASEY KEY RD. Address: Address: City-St-Zip: BRADENTON, FL 34202 City-St-Zip: OSPREY, FL 34229 Title: () Delete Title: () Change () Addition MORSE, WILLIAM Name: Name: 1510 PELICAN POINT DR #167 Address: Address: City-St-Zip: SARASOTA, FL 34231 City-St-Zip: Title: () Delete Title: () Change () Addition KRAUT, JUDITH Name: Name: Address: 24 GULF MANOR DR Address: VENICE, FL 34285 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JUDITH BREMER CO-T 02/06/2009