

2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 26, 2007 08:00 AM
Secretary of State

DOCUMENT # 731396

1. Entity Name
EVANGELICAL COVENANT CHURCH OF BAY INDIES,
INC.



Principal Place of Business
950 RIDGEWOOD AVE
VENICE, FL 34285 US

Mailing Address
950 RIDGEWOOD AVE
VENICE, FL 34285 US



01312007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1572897

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ARCHER, DONALD E
984 BONAIRE E
VENICE, FL 34285

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
C
MELBY, CHAD
STREET ADDRESS
871 ZACADA
CITY-ST-ZIP
VENICE, FL 34285

TITLE
NAME
T
ARCHER, DON
STREET ADDRESS
984 BONAIRE
CITY-ST-ZIP
VENICE, FL 34285

TITLE
NAME
ES
PROSSER, MOLLY
STREET ADDRESS
425 CORDIA
CITY-ST-ZIP
VENICE, FL 34285

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000735781
05/10/07-80048-006 70.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Donald Archer* DONALD ARCHER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/07 941-444-5042

Date

Daytime Phone #