

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 737935

FILED
Jan 07, 2008
Secretary of State

Entity Name: COMMUNITY COVENANT CHURCH OF SPANISH LAKES, INC.

Current Principal Place of Business:

1340 NORTH TAMiami TRAIL
NOKOMIS, FL 34275 US

New Principal Place of Business:

4904 ITHACA LANE
SARASOTA, FL 34243 US

Current Mailing Address:

157 SANIBEL
NOKOMIS, FL 34275 US

New Mailing Address:

4904 ITHACA LANE
SARASOTA, FL 34243 US

FEI Number: 59-2354453 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WALTON, HELEN A.
157 SANIBEL
NOKOMIS, FL 34275 US

Name and Address of New Registered Agent:

DONALD C STEWART
4904 ITHACA LANE
SARASOTA, FL 34243 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: DONALD C STEWART

01/07/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: WALTON, HELEN, A,
Address: 157 SANIBEL
City-St-Zip: NOKOMIS, FL

Title: MD () Delete
Name: STEWART, DONALD
Address: 4904 ITHACA LANE
City-St-Zip: SARASOTA, FL 34243

Title: MD () Delete
Name: COLE, FLOYD
Address: 381 SANIBEL ST
City-St-Zip: NOKOMIS, FL 34275

Title: MD () Delete
Name: HATHAWAY, JEANNE
Address: 64 LA COSTA
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: DONALD C STEWART,
Address: 4904 ITHACA LANE
City-St-Zip: SARASOTA, FL 34243

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MD (X) Change () Addition
Name: ROWLAND, DARYL
Address: 293 LA COSTA
City-St-Zip: NOKOMIS, FL 34275

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: DONALD C STEWART

MD

01/07/2008

Electronic Signature of Signing Officer or Director

Date