

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 05, 2009  
Secretary of State**

DOCUMENT# 737935

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:**

**Current Mailing Address:**

4904 ITHACA LANE  
SARASOTA, FL 34243 US

**New Mailing Address:**

FEI Number: 59-2354453      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DONALD C STEWART  
4904 ITHACA LANE  
SARASOTA, FL 34243 US

**Name and Address of New Registered Agent:**

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:**

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

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: ROWLAND, DARYL  
Address: 293 LA COSTA  
City-St-Zip: NOKOMIS, FL 34275

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

Title: MD (X) Change ( ) Addition  
Name: VIRGINIA, HAMLIN  
Address: 14 BOCA CIEGA  
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

TD

01/05/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date