

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743721

FILED  
Jul 08, 2007  
Secretary of State

Entity Name: ASBURY COVENANT CHURCH, INC.

**Current Principal Place of Business:**

1100 ST. CLAIR ABRAMS AVE.  
TAVARES, FL 32778 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1043  
TAVARES, FL 32778 US

**New Mailing Address:**

1100 ST. CLAIR ABRAMS AVE.  
TAVARES, FL 32778 US

FEI Number: 51-0247940      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:**

DONALD E. KEESLING  
1408 HIGHLAND AVE.  
TAVARES, FL 32778 US

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

MARK ANDREWS  
1100 ST. CLAIR ABRAMS AVE.  
TAVARES, FL 32778 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: MARK ANDREWS

07/08/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: KEESLING, DON  
Address: 1408 W HIGHLANG AVE  
City-St-Zip: TAVARES, FL 32778

Title: PD ( ) Delete  
Name: MURSCH, WILLIAM F.,  
Address: 31050 COVE ROAD  
City-St-Zip: TAVRES, FL

Title: SD (X) Delete  
Name: MUSSELMAN, DOROTHY  
Address: 2280 W HWY #44  
City-St-Zip: EUSTIS, FL

Title: D (X) Delete  
Name: COOK, ANNA  
Address: 1343 ELKHART CIRCLE  
City-St-Zip: TAVARES, FL 32778

Title: D (X) Delete  
Name: FISCHER, FRANCES  
Address: 1311 MOHAWK CIRCLE  
City-St-Zip: TAVARES, FL 32778

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

Title: PD (X) Change ( ) Addition  
Name: ANDREWS, MARK  
Address: 1100 ST. CLAIR ABRAMS AVE.  
City-St-Zip: TAVARES, FL 32778

Title: VD (X) Change ( ) Addition  
Name: LARSON, MARK  
Address: 2018 80TH STREET NORTH  
City-St-Zip: ST. PETERSBURG, FL 33710

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: MARK ANDREWS

PRES

07/08/2007

Electronic Signature of Signing Officer or Director

Date