## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## FILED May 02, 2007 08:00 AM Secretary of State **DOCUMENT #759335** 1. Entity Name CHRISTIAN COVENANT CHURCH, INC. Principal Place of Business Mailing Address 1320 S. STATE RD., 15A 1531 W. TALTON AVE DELAND, FL 32720 DELAND, FL 32720 04302007 No Chg-NP CR2E037 (4/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2113498 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MIRINO, PHIL DO NOT WRITE 1531 W. TALTON AVENUE **DELAND, FL 32720** 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 alignature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing Filing Fee is \$61.25 U000000753<u>77</u>8 Trust Fund Contribution. Added to Fees Due by May 1, 2007 05/22/07-80035-014 150.00 10. OFFICERS AND DIRECTORS MAME MIRINO, PHIL STREET ADDRESS 1531 TALTON AVE CITY-ST-ZIP DELAND, FL 32720 TITLE MIRINO, MARGUERITE NAME STREET ADDRESS 4051 GRAND AVE CITY-ST-7IP DELAND, FL 32720 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 orderess with all other like empowered.

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

OFFICER OR DIRECTOR