2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 24, 2007 8:00 am
Secretary of State
08-24-2007 90025 006 ****61.25

DOCUMENT # F04000004212

1. Entity Name

COVENANT HOUSE INCORPORATED

Principal Place of Business	Mailing Address
346 WEST 17TH STREET NEW YORK NY 10011-5002	346 WEST 17TH STREET NEW YORK NY 10011-5002

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
5 Penn Plaza, 3rd Floor	**5 Penn Plaza, 3rd Floor**
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: **New York, NY**	City & State: **New York, NY**
Zip: **10001** Country:	Zip: **10001** Country:

2nd MOORE CR2E037 (4/07)

4. FEI Number: 13-2725416 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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: **N/A**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By September 5, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C MCAULEY, BRIAN D C/O COVENANT HOUSE NEW YORK NY 10011-5002	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**Secretary** **James White** **5 Penn Plaza, 3rd Floor** **New York, NY 10001**	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CORRADO, FRED C/O COVENANT HOUSE NEW YORK NY 10011-5002	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**Director** **William J. Montgoris** **5 Penn Plaza, 3rd Floor** **New York, NY 10001**	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SITE, JOHN C C/O COVENANT HOUSE NEW YORK NY 10011-5002	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**Director** **Judith G. Baylock** **5 Penn Plaza, 3rd Floor** **New York, NY 10001**	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P CRUISE, SISTER PATRICI A D.C. C/O COVENANT HOUSE ~~NEW YORK NY 10011-5002~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	 **New York, NY 10001**	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPS HARNETT, JAMES J C/O COVENANT HOUSE NEW YORK NY 10011-5002	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**Director** **G. Andrea Botta** **5 Penn Plaza, 3rd Floor** **New York, NY 10001**	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T CARDANY, ROBERT R JR C/O COVENANT HOUSE ~~NEW YORK NY 10011-5002~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	 **New York, NY 10001**	☒ Change ☐ Addition

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: Robert R. Cardany, Jr. 8/20/07 (212) 727-4155
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #