2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003377

Entity Name: COVENANT PROPERTY MANAGEMENT INC.

FILED Apr 28, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10202 REVERE LANE N 415 120TH LN NW

MAPLE GROVE, MN 55369 COON RAPIDS, MN 55448

Current Mailing Address: New Mailing Address:

P.O. BOX 46605 1936 BRUCE B DOWNS BLVD TAMPA, FL 33647 514

WESLEY CHAPEL, FL 33543

FEI Number: 91-2134126 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FIKSEN, CHRISTIAN
9014 CORMORANT CT.
TAMPA, FL 33647 US

FIKSEN, CHRISTIAN
1936 BRUCE B DOWNS BLVD
514
WESLEY CHAPEL, FL 33543 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: 04/28/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS () Delete Title: DPS (X) Change () Addition

Name: FIKSEN, CHRISTIAN Name: FIKSEN, CHRISTIAN

 Address:
 9014 CORMORANT CT.
 Address:
 1936 BRUCE B DOWNS BLVD, SUITE #514

 City-St-Zip:
 TAMPA, FL 33647
 City-St-Zip:
 WESLEY CHAPEL, FL 33543

Title: DVT () Delete Title: DVT (X) Change () Addition

Name: FIKSEN, TERESA Name: FIKSEN, TERESA

Address: 9014 CORMORANT CT. Address: 1936 BRUCE B DOWNS BLVD, SUITE #514

City-St-Zip: TAMPA, FL 33647 City-St-Zip: WESLEY CHAPEL, FL 33543

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTIAN FIKSEN P 04/28/2007

Electronic Signature of Signing Officer or Director

Date