## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Feb 06, 2001 8:00 am DOCUMENT # N0000003793 Secretary of State 1. Entity Name CHURCH OF THE COVENANT, INC. 02-06-2001 90312 013 \*\*\*\*61.25 Principal Place of Business Mailing Address 2699 SEVILLE BLVD, SUITE 701 2699 SEVILLE BLVD. SUITE 701 915638 CLEARWATER FL 33764 **CLEARWATER FL 33764** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number 59 - 301 Applied For City & State Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) HARRISON, KERRI K 2699 SEVILLE BLVD, SUITE 701 **CLEARWATER FL 33764** City Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Change TITLE ☐ Delete TITLE BLEVINS, DOUGLAS D NAME NAME STREET ADDRESS STREET ADDRESS 6496 CEDAR MOUNTAIN RD CITY-ST-ZIP CITY-ST-ZIP DOUGLASVILLE GA 30134 Delete Addition TITLE D TITLE ☐ Change NAME JONES, WARREN D NAME STREET ADDRESS STREET ADDRESS 2706 MEANDER LANE CITY-ST-ZIP CITY-ST-ZIP SAFETY HARBOR FL 34695 Delete TITLE ☐ Change Addition TITLE NAME GARDNER, STEPHEN NAME STREET ADDRESS STREET ADDRESS 1976 SEVER DR CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 33764** ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME HARRISON, KERI K STREET ADDRESS STREET ADDRESS 2699 SEVILLE BLVD, SUITE 701 CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33764 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME BLEVINS, E M ZEKE STREET ADDRESS STREET ADDRESS 24 FRESHWATER DR CITY-ST-ZIP CITY-ST-ZIP PALM HARBOR FL 34684 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

**FILED**