

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003793

FILED
May 01, 2005
Secretary of State

Entity Name: CHURCH OF THE COVENANT, INC.

Current Principal Place of Business:

2699 SEVILLE BLVD, SUITE 701
CLEARWATER, FL 33764

New Principal Place of Business:

2699 SEVILLE BLVD,
SUITE 701
CLEARWATER, FL 33764

Current Mailing Address:

2699 SEVILLE BLVD, SUITE 701
CLEARWATER, FL 33764

New Mailing Address:

2699 SEVILLE BLVD,
SUITE 701
CLEARWATER, FL 33764

FEI Number: 59-3026471 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:

ROBINSON, MARY A
2699 SEVILLE BLVD, SUITE 701
CLEARWATER, FL 33764 US

Name and Address of New Registered Agent:

ROBINSON, MARY A
2699 SEVILLE BLVD,
SUITE 701
CLEARWATER, FL 33764 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: _____

05/01/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BLEVINS, DOUGLAS D
Address: 6496 CEDAR MOUNTAIN RD
City-St-Zip: DOUGLASVILLE, GA 30134

Title: D (X) Delete
Name: GARDNER, STEPHEN
Address: 1976 SEVER DR
City-St-Zip: CLEARWATER, FL 33764

Title: D (X) Delete
Name: HARRISON, KERI K
Address: 2699 SEVILLE BLVD, SUITE 701
City-St-Zip: CLEARWATER, FL 33764

Title: D (X) Delete
Name: BLEVINS, E M ZEKE
Address: 24 FRESHWATER DR
City-St-Zip: PALM HARBOR, FL 34684

Title: D (X) Delete
Name: ROBINSON, MARY A
Address: 2699 SEVILLE BLVD APT 701
City-St-Zip: CLEARWATER, FL 33764

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ROBINSON, MARY A TRUSTEE
Address: 2699 SEVILLE BLVD #701
City-St-Zip: CLEARWATER, FL 33764

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

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 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 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: MARY A. ROBINSON

D/TR

05/01/2005

Electronic Signature of Signing Officer or Director

Date