

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004183

FILED  
Jan 04, 2007  
Secretary of State

Entity Name: COVENANT KID'S MANOR INC.

## Current Principal Place of Business:

830 BELHAVEN DRIVE  
ORLANDO, FL 32828

## New Principal Place of Business:

## Current Mailing Address:

830 BELHAVEN DRIVE  
ORLANDO, FL 32828

## New Mailing Address:

FEI Number: 59-3664515      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WEBSTER, CYNTHIA M  
2587 FLOWERING DOGWOOD DRIVE  
ORLANDO, FL 32828      US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WEBSTER, CYNTHIA M  
Address: 2587 FLOWERING DOGWOOD DRIVE  
City-St-Zip: ORLANDO, FL 32828

Title: VD ( ) Delete  
Name: WEBSTER, SCOTT J  
Address: 2587 FLOWERING DOGWOOD DRIVE  
City-St-Zip: ORLANDO, FL 32828

Title: D ( ) Delete  
Name: BIRKETT, LORI  
Address: 830 BELHAVEN DRIVE  
City-St-Zip: ORLANDO, FL 32828

Title: S/D ( ) Delete  
Name: WESLEY, PATRICIA  
Address: 12534 PERCY LANE  
City-St-Zip: JACKSONVILLE, FL 32215

Title: D ( ) Delete  
Name: WHITE, DUANE L  
Address: 4008 SEVEN HILLS TRAIL  
City-St-Zip: STONE MOUNTAIN, GA 30083

Title: VD ( ) Delete  
Name: WESLEY, EDDIE III  
Address: 12534 PERCY LANE  
City-St-Zip: JACKSONVILLE, FL 32215

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition  
Name: ACKER, BEVERLY MD  
Address: 3400 QUADRANGLE BLVD  
City-St-Zip: ORLANDO, FL 32817

Title: S/D (X) Change ( ) Addition  
Name: SIERRA, CARMEN ATTY  
Address: 1906 MEETING PLACE  
City-St-Zip: ORLANDO, FL 32814

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

Title: VD (X) Change ( ) Addition  
Name: DANIELS, KIMBERLY ATTY  
Address: 332 N. MAGNOLIA AVE  
City-St-Zip: ORLANDO, FL 32801

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CYNTHIA M. WEBSTER

PRES

01/04/2007

Electronic Signature of Signing Officer or Director

Date