


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

<b>CORPORATION REINSTATEMENT</b>  <b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <b>N00000005672</b>	
1. Corporation Name <b>COVENANT COMMUNITY FELLOWSHIP, INC.</b>	
2. Principal Office Address <b>672 NW 90th TERRACE</b> Suite, Apt. #, etc. <b>BLDG. # 24</b> City & State <b>PLANTATION FLORIDA</b> Zip <b>33324</b> Country <b>U.S.A</b>	3. Mailing Office Address <b>273 S. STATE ROAD 7</b> Suite, Apt. #, etc. <b># 232</b> City & State <b>MARGATE</b> Zip <b>33068</b> Country <b>U.S.A</b>

**FILED**  
**04 MAR -3 AM 11:34**  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**REINSTATEMENT 03-04**  
**000029732610**  
**03/02/04--01057--012 \*\*122.50**

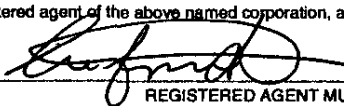
4. Date Incorporated or Qualified To Do Business in Florida **8.23.2000**

5. FEI Number **651033315** Applied For ☐ Not Applicable ☐

6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent		
Name <b>JOHN M.R. GORDON</b>		
Street Address (P.O. Box Number is Not Acceptable) <b>672 N.W. 90th TERRACE</b>		
Suite, Apt. #, Etc. <b>BUILDING # 24</b>		
City <b>PLANTATION</b>	State <b>FL</b>	Zip Code <b>33324</b>


8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent:  Date **2.10.04**

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	JOHN M.R. GORDON	672 N.W. 90th TERRACE BLDG # 24	PLANTATION, FL 33324
SD	LINDA P. GORDON	672 N.W. 90th TERRACE BLDG # 24	PLANTATION FL 33324
TD	ANDREW A. GORDON	2800 NW 56th AVE # B-201	LAUDERHILL FL 33313
D	PATRICIA ROBINSON	2800 NW 56th AVE # B-201	LAUDERHILL FL 33313
D	ROBERT FLETCHER	11315 SW 154 TERRACE	MIAMI FL 33157
D	DERRICK PATTERSON	4500 NW 36 STREET # 109	LAUDERDALE LAKES FL 33319

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:  **ANDREW A. GORDON** Date **2.10.04** Daytime Phone # **954-294-0551**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E061 (01/04)



# Covenant Community Fellowship

Worshipping at Westpine Middle School  
9393 NW 50<sup>th</sup> Street, Sunrise, FL 33351  
Mailing Address: 273 S. State Road 7, #232  
Margate, FL 33068  
(954) 969-8485 ~ Fax: (954) 969-8478  
Email: [ccf@covcom.org](mailto:ccf@covcom.org)

**Senior Pastor: Bishop John M.R. Gordon**

To Whom It May Concern

This is to inform you that the notice from your office was returned to the Post Office. Our new mailing address is listed above.

Bishop John Gordon