

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006273

FILED
Apr 29, 2011
Secretary of State

Entity Name: GOD'S COVENANT MISSION CENTER, INC. OF VOLUSIA COUNTY

Current Principal Place of Business:

502 SOUTH THOMPSON STREET
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

502 SOUTH THOMPSON STREET
DELAND, FL 32720

New Mailing Address:

FEI Number: 59-3678600

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITES, PATRICIA
502 SOUTH THOMPSON STREET
DELAND, FL 32720 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: MRS
Name: JENKINS, DONNA
Address: OHIO AVE
City-St-Zip: LAKE HELEN, FL 32744

Title: MS
Name: COLE, CALLIE
Address: JOE SMITH LANE
City-St-Zip: LAKE HELEN, FL 32744

Title: MRS
Name: DUKES, LORETTA
Address: 635 WEST OHIO
City-St-Zip: LAKE HELEN, FL 32744

Title: MR
Name: HAMILTON, GARY
Address: 1012 E HOWRY
City-St-Zip: DELAND, FL 32724

Title: MR
Name: HOUGH, DWAIN
Address: 549 SHERMAN STREET
City-St-Zip: LAKE HELEN, FL 32744

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA W. WHITES

MS

04/29/2011

Electronic Signature of Signing Officer or Director

Date