

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000020

FILED
Jan 28, 2009
Secretary of State

Entity Name: COVENANT ORTHODOX PRESBYTERIAN CHURCH, INC.

Current Principal Place of Business:

2885 EAST OLIVE ROAD
PENSACOLA, FL 32514

New Principal Place of Business:

Current Mailing Address:

2885 EAST OLIVE ROAD
PENSACOLA, FL 32514

New Mailing Address:

FEI Number: 59-3689071

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALHOON, RONALD J
2885 EAST OLIVE ROAD
PENSACOLA, FL 32514 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: P () Delete
Name: COMMON, TIMOTHY
Address: 9715 QUAIL HOLLOW BLVD
City-St-Zip: PENSACOLA, FL 32514

Title: V () Delete
Name: CALHOON, RONALD J
Address: 2112 SQUIRE DRIVE
City-St-Zip: CANTONMENT, FL 32533

Title: ST () Delete
Name: HOBBS, WILLIAM REV.
Address: 7235 OLD CHEMONIE CT.
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: SCHORTMANN, JOHN
Address: 4150 CROYDON RD.
City-St-Zip: PENSACOLA, FL 32514

Title: D () Delete
Name: DOSTER, RUSSELL
Address: 2010 BEAVER CREEK DR.
City-St-Zip: HAVANA, FL 32333

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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

I hereby certify that the information supplied with this filing does not qualify 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: JOHN SCHORTMANN

D

01/28/2009

Electronic Signature of Signing Officer or Director

Date