2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2007
Secretary of State

DOCUMENT# N01000007430

Entity Name: COVENANT MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

P.O. BOX 570-116
MIAMI, FL 33257

New Principal Place of Business:

16820 S. W. 109 AVENUE
MIAMI, FL 33157

Current Mailing Address:

P.O. BOX 570-116
MIAMI, FL 33257

New Mailing Address:

FEI Number: 65-1157125 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAWKINS, LINDA R
16820 S.W. 109TH AVE
MIAMI, FL 33157 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:	DP	( ) Delete
Name:	HAWKINS, LINDA R	
Address:	16820 S.W. 109TH AVE	
City-St-Zip:	MIAMI, FL 33157 US	
Title:	DT	( ) Delete
Name:	HAWKINS, JENNIFER N	
Address:	16820 SW 109 AVENIE	
City-St-Zip:	MIAMI, FL 33157 US	
Title:	D	( ) Delete
Name:	JOHNSON, PATRICIA	
Address:	17043 NW 22 STREET	
City-St-Zip:	PEMBROKE PINES, FL 33029 US	
Title:	D	( ) Delete
Name:	HARTLEY, DELORES	
Address:	14700 WASHINGTON BLVD APT #302	
City-St-Zip:	MIAMI, FL 33176 US	
Title:	D	( ) Delete
Name:	BAKER, SABRINA	
Address:	19400 OAK MONTE DRIVE	
City-St-Zip:	MIAMI LAKES, FL 33168 US	
Title:	D	( ) Delete
Name:	MCMILLON, STEPHANIE	
Address:	1585 W 34 STREET	
City-St-Zip:	WEST PALM BEACH, FL 33407 US	

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:	
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 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: LINDA R. HAWKINS DP 03/27/2007

Electronic Signature of Signing Officer or Director — Date