

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004715

FILED  
Apr 14, 2004  
Secretary of State

Entity Name: DAVIDIC COVENANT MINISTRIES INC.

**Current Principal Place of Business:**

419 S. 21ST AVENUE  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

419 S. 21ST AVENUE  
HOLLYWOOD, FL 33020

**New Mailing Address:**

FEI Number: 37-1474247

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COOK, ASONIA A  
6633 N.W. 181 TERRACE  
MIAMI, FL 33015 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: PS ( ) Delete  
Name: COOK, ASONIA A  
Address: 2901 N 47TH TERR #144  
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: VT ( ) Delete  
Name: COOKE, JONATHAN D  
Address: 2901 N 47TH TERR #144  
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: D ( ) Delete  
Name: PHILLIPS, MARK A  
Address: 2001 POLK STREET  
City-St-Zip: HOLLYWOOD, FL 33020

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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: D ( ) Change (X) Addition  
Name: ARMSTRONG, ALESIA M  
Address: 2814 NW 132 ST  
City-St-Zip: OPALOCKA, FL 33054

Title: D ( ) Change (X) Addition  
Name: CHIQUITA, ROLLE-JONES  
Address: 110 SW 11 ST  
City-St-Zip: HALLANDALE, FL 33009

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ASONIA COOK

PS

04/14/2004

Electronic Signature of Signing Officer or Director

Date