2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007
Secretary of State

DOCUMENT# N02000009844

Entity Name: COVENANT COMMUNITY CHURCH OF DELAND, INC.

Current Principal Place of Business:

1255 GLEN ROYAL TERRACE
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

1255 GLEN ROYAL TERRACE
DELAND, FL 32720

New Mailing Address:

FEI Number: 54-2082327 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHAW, DAVID
1255 GLEN ROYAL TERRACE
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:	D	( ) Delete
Name:	SHAW, DAVID	
Address:	1255 GLEN ROYAL TERRACE	
City-St-Zip:	DELAND, FL 32720	
Title:	PD	( ) Delete
Name:	BRANDER, THOMAS	
Address:	204 ADDINGTON DR.	
City-St-Zip:	DELAND, FL 32724	
Title:	D	( ) Delete
Name:	GATHINGS, JAMES	
Address:	121 W. STETSON AVE.	
City-St-Zip:	DELAND, FL 32720	
Title:	TD	( ) Delete
Name:	LEE, CRAIG	
Address:	426 N. CLARA AVE.	
City-St-Zip:	DELAND, FL 32720	
Title:	SD	( ) Delete
Name:	SWANSON, JAMES	
Address:	2747 TURNBULL COVE DRIVE	
City-St-Zip:	NEW SMYRNA BEACH, FL 32168	
Title:	D	( ) Delete
Name:	FACKLER, BENJAMIN	
Address:	603 N. KENTUCKY AVE.	
City-St-Zip:	DELAND, FL 32724	

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	(X) Change ( ) Addition
Name:	LEE, CRAIG	
Address:	426 N. CLARA AVE.	
City-St-Zip:	DELAND, FL 32720	
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: DAVID C. SHAW D 04/25/2007

Electronic Signature of Signing Officer or Director — Date