## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000002963

FILED Apr 25, 2006 Secretary of State

Entity Name: COVENANT APOSTOLIC NETWORK, INC.

Current Principal Place of Business: New Principal Place of Business:

3970 RCA BLVD., STE. 7001 9153 ROAN LANE

PALM BEACH GÁRDENS, FL 33410 PALM BEACH GARDENS, FL 33403

Current Mailing Address: New Mailing Address:

3970 RCA BLVD., STE. 7001 9153 ROAN LANE

PALM BEACH GÁRDENS, FL 33410 PALM BEACH GARDENS, FL 33403

FEI Number: 65-1190563 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

BENZ, NORMAN 10254 ALLAMANDA CIRCLE BENZ, NORMAN 9153 ROAN LANE

PALM BEACH GARDENS, FL 33410 US PALM BEACH GARDENS, FL 33403 US

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: NORMAN BENZ 04/25/2006

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ()Delete Title: ()Change ()Addition

 Name:
 BENZ, NORMAN
 Name:

 Address:
 10254 ALLAMANDA CIRCLE
 Address:

 City-St-Zip:
 PALM BEACH GARDENS, FL 33410
 City-St-Zip:

Title: STD ( ) Delete Title: STD (X) Change ( ) Addition

Name: ROSS, JOSEPH A Name: ROSS, JOSEPH A

 Address:
 1780 S. BUCKLEY ROAD
 Address:
 399 S.E. OAKRIDGE DRIVE

 City-St-Zip:
 AURORA, CO 80017
 City-St-Zip:
 PORT ST. LUCIE, FL 34984

Title: VD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BENZ, JONATHAN
 Name:

 Address:
 3630 WHITEHALL DRIVE #403
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33401
 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: NORMAN BENZ PD 04/25/2006