

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002963

FILED
Apr 17, 2008
Secretary of State

Entity Name: COVENANT APOSTOLIC NETWORK, INC.

Current Principal Place of Business:

9153 ROAN LANE
PALM BEACH GARDENS, FL 33403

New Principal Place of Business:

Current Mailing Address:

9153 ROAN LANE
PALM BEACH GARDENS, FL 33403

New Mailing Address:

FEI Number: 65-1190563

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BENZ, NORMAN
9153 ROAN LANE
PALM BEACH GARDENS, FL 33403 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: PD () Delete
Name: BENZ, NORMAN
Address: 10254 ALLAMANDA CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: STD () Delete
Name: ROSS, JOSEPH A
Address: 399 S.E. OAKRIDGE DRIVE
City-St-Zip: PORT ST. LUCIE, FL 34984

Title: VD () Delete
Name: BENZ, JONATHAN
Address: 3630 WHITEHALL DRIVE #403
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: BROOK, LINDA R
Address: 9153 ROAN LANE
City-St-Zip: PALM BEACH GARDENS, FL 33403

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: NORMAN BENZ

PD

04/17/2008

Electronic Signature of Signing Officer or Director

Date