

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009242

FILED  
Sep 18, 2009  
Secretary of State

**Entity Name:** WORLD COVENANT MINISTRIES INTERNATIONAL, INC.

**Current Principal Place of Business:**

3002 PINECONE DRIVE  
206  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

2448 W. 29TH STREET  
ORLANDO, FL 32806

**Current Mailing Address:**

3002 PINECONE DRIVE  
206  
KISSIMMEE, FL 34741

**New Mailing Address:**

410 PEARL STREET  
LAKE WALES, FL 33853

**FEI Number:** 65-1060176

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

DAVIS, TWANNA H  
3002 PINECONE DRIVE  
206  
KISSIMMEE, FL 34741 US

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

DAVIS, TWANNA H  
410 PEARL STREET  
LAKE WALES, FL 33853 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: \_\_\_\_\_

09/18/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DAVIS, DOMINIQUE A  
Address: 3002 PINECONE DRIVE  
City-St-Zip: KISSIMMEE, FL 34741

Title: D ( ) Delete  
Name: DAVIS, TAWANNA H  
Address: 3002 PINECONE DRIVE  
City-St-Zip: KISSIMMEE, FL 34741

Title: D ( ) Delete  
Name: THREAT, KIMBERLY  
Address: 3002 PINECONE DRIVE  
City-St-Zip: KISSIMMEE, FL 34741

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: DAVIS, DOMINIQUE A  
Address: 410 PEARL STREET  
City-St-Zip: LAKE WALES, FL 33853

Title: D (X) Change ( ) Addition  
Name: DAVIS, TAWANNA H  
Address: 410 PEARL STREET  
City-St-Zip: LAKE WALES, FL 33853

Title: D (X) Change ( ) Addition  
Name: MASSEY, ROBERT  
Address: 410 PEARL STREET  
City-St-Zip: LAKE WALES, FL 33853

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: DOMINIQUE A. DAVIS

P

09/18/2009

Electronic Signature of Signing Officer or Director

Date