

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 6/30: \$156 (IF DISSOLVED), MINIMUM AMOUNT DUE TO REINSTATE: \$295**

NONPROFIT CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortum
Secretary of State
DIVISION OF CORPORATIONS

FILED

1995 JUL 13 AM 8:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N03764 (0)

1. Corporation Name
COVENANT BAPTIST CHURCH, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
1055 NW 6TH AVE. 1055 NW 6TH AVE.
FLORIDA CITY FL 33034-2007 FLORIDA CITY FL 33034-2007

3. Date Incorporated or Qualified 06/19/1984 3a. Date of Last Report 06/16/1994
4. FEI Number 05-0148303 Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Nonprofit with IRS 601(c)(3) Tax Exempt Status **FILING FEE IS \$61.25**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
KEY, WALLACE
1055 NW 6 AVENUE
FLORIDA CITY FL 33034

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City FL B5 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	KEY, ISIAH
STREET ADDRESS	C/O 1055 NW 6 AVENUE
CITY- ST- ZIP	FLORIDA CITY FL
TITLE	VD
NAME	KEY, WALLACE
STREET ADDRESS	C/O 1055 NW 6 AVENUE
CITY- ST- ZIP	FLORIDA CITY FL
TITLE	STD
NAME	CRIGLER, WILLIAM
STREET ADDRESS	C/O 1055 NW 6 AVENUE
CITY- ST- ZIP	FLORIDA CITY FL
TITLE	D
NAME	BEASLEY, WILLIE
STREET ADDRESS	C/O 1055 NW 6 AVENUE
CITY- ST- ZIP	FLORIDA CITY FL
TITLE	D
NAME	CLARKE, HERMAN
STREET ADDRESS	C/O 1055 NW 6 AVENUE
CITY- ST- ZIP	FLORIDA CITY FL
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Wallace Key June 18, 1995 305-247-1409
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR Date (Circle 1 if first)

CR2E037 (3/95)