

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03764

FILED
Feb 01, 2009
Secretary of State

Entity Name: COVENANT BAPTIST CHURCH, INC.

Current Principal Place of Business:

1055 NW 6TH AVE.
FLORIDA CITY, FL 330342007

New Principal Place of Business:

Current Mailing Address:

1055 NW 6TH AVE.
FLORIDA CITY, FL 330342007

New Mailing Address:

FEI Number: 05-0148303

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOVETT, BENNIE
C/O 1055 NORTHWEST 6 AVENUE
FLORIDA CITY, FL 33034 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: EDWARDS, ERNEST
Address: C/O 1055 NW 6 AVENUE
City-St-Zip: FLORIDA CITY, FL

Title: VD () Delete
Name: LOVETTE, BENNIE
Address: C/O 1055 NW 6 AVENUE
City-St-Zip: HOMESTEAD, FL 33034

Title: STD () Delete
Name: CRIGLER, WILLIAM,
Address: C/O 1055 NW 6 AVENUE
City-St-Zip: FLORIDA CITY, FL

Title: D () Delete
Name: BEASLEY, WILLIE,
Address: C/O 1055 NW 6 AVENUE
City-St-Zip: FLORIDA CITY, FL

Title: D () Delete
Name: CLARKE, HERMAN,
Address: C/O 1055 NW 6 AVENUE
City-St-Zip: FLORIDA CITY, FL

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: () 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: BENNIE LOVETTE

VD

02/01/2009

Electronic Signature of Signing Officer or Director

Date