

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003631

FILED  
Jun 29, 2005  
Secretary of State

**Entity Name:** COVENANT ACADEMY OF LAKE CITY, INC.

**Current Principal Place of Business:**

4471 HWY 90 WEST  
LAKE CITY, FL 32055

**New Principal Place of Business:**

**Current Mailing Address:**

4471 HWY 90 WEST  
LAKE CITY, FL 32055

**New Mailing Address:**

**FEI Number:** 34-1990487      **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:**

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

TAYLOR, RUSSELL  
365 SW GALLANT LANE  
LAKE CITY, FL 32055 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: TAYLOR, RUSSELL  
Address: 365 SW GALLANT LANE  
City-St-Zip: LAKE CITY, FL 32024

Title: SD ( ) Delete  
Name: TAYLOR, CHRISTINA  
Address: 365 SW GALLANT LANE  
City-St-Zip: LAKE CITY, FL 32024

Title: TD ( ) Delete  
Name: JOYCE, LURONDA  
Address: 10153 HWY 90 WEST  
City-St-Zip: LAKE CITY, FL 32055

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

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

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

Title: TD (X) Change ( ) Addition  
Name: JOYCE, LURONDA  
Address: 10153 HWY 90 WEST  
City-St-Zip: LAKE CITY, FL 32055

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RUSSELL TAYLOR

PD

06/29/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date