

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N07000004184

1. Entity Name
CAMP COVENANT, INC.



Principal Place of Business
2210 S. RIO GRANDE AVE
ORLANDO, FL 32805

Mailing Address
2210 S. RIO GRANDE AVE
ORLANDO, FL 32805

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

11112008 REIN-NP CR2E099 (1/07)

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRACY, LAVON W
2210 S. RIO GRANDE AVE
ORLANDO, FL 32805

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$61.25
After January 1, 2009, Fee will be \$122.50

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

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Delete
NAME BRACY, LAVON
STREET ADDRESS 5315 WOODSTEAD WAY
CITY-ST-ZIP ORLANDO, FL 32819

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
100137931451
11/14/08--01051--002 **\$61.25

TITLE VP ☐ Delete
NAME CANADA, JOSEPH
STREET ADDRESS 12966 BROAKFIELD CIR
CITY-ST-ZIP ORLANDO, FL 32837

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME DAILEY, SANDRA
STREET ADDRESS 1926 TORREY DR
CITY-ST-ZIP ORLANDO, FL 32818

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
REINSTATEMENT

TITLE T ☐ Delete
NAME WILSON, SHIRLEY
STREET ADDRESS 6820 NAWADAH BLVD
CITY-ST-ZIP ORLANDO, FL 32818

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME FORTSON, BERNICE
STREET ADDRESS 7215 RAVENNA AVE
CITY-ST-ZIP ORLANDO, FL 32815

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME GRAHAM, ADRAIN
STREET ADDRESS 4603 WELLESLEY DR
CITY-ST-ZIP ORLANDO, FL 32818

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *LaVon W Bracy*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/11/08 (407) 399-9587
Date Daytime Phone #

FILED

08 NOV 14 PM 5:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

