

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jul 02, 2009**  
**Secretary of State**

DOCUMENT# N08000004232

**Entity Name:** PENIEL COVENANT CHRISTIAN CENTER, INC.**Current Principal Place of Business:**17622 41ST ROAD NORTH  
LOXAHATCHEE, FL 33470 US**New Principal Place of Business:****Current Mailing Address:**17622 41ST ROAD NORTH  
LOXAHATCHEE, FL 33470 US**New Mailing Address:****FEI Number:** 26-2514114**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**WILKERSON, JAMES E PASTOR  
17622 41ST ROAD NORTH  
LOXAHATCHEE, FL 33470 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:** D ( ) Delete  
**Name:** WILKERSON, JAMES E PASTOR  
**Address:** 17622 41ST ROAD NORTH  
**City-St-Zip:** LOXAHATCHEE, FL 33470 US**Title:** D ( ) Delete  
**Name:** SOMMONS, JULIOUS  
**Address:** 341 WEST 22ND COURT  
**City-St-Zip:** RIVIERA BEACH, FL 33404 US**Title:** D ( ) Delete  
**Name:** WILKERSON, SABRINA P  
**Address:** 17622 41ST ROAD NORTH  
**City-St-Zip:** LOXAHATCHEE, FL 33470 US**Title:** D ( ) Delete  
**Name:** SOMMONS, EULA G  
**Address:** 301 WEST 22ND COURT  
**City-St-Zip:** RIVIERA BEACH, FL 33404 US**Title:** D ( ) Delete  
**Name:** GRANDISON, IRIS G  
**Address:** 4802 23RD PLACE NORTH  
**City-St-Zip:** WEST PALM BEACH, FL 33417**Title:** D ( ) Delete  
**Name:** MCDONALD, RAY  
**Address:** 640 EDGEBROOK LANE  
**City-St-Zip:** WELLINGTON, FL 33411**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** D (X) Change ( ) Addition  
**Name:** WILKERSON, SABRINA P  
**Address:** 17622 41ST ROAD NORTH  
**City-St-Zip:** LOXAHATCHEE, FL 33404 US**Title:** D (X) Change ( ) Addition  
**Name:** PATTERSON, EDWARD  
**Address:** 1868 OLEANDER DRIVE  
**City-St-Zip:** ROYAL PALM BEACH, FL 33411 US**Title:** D (X) Change ( ) Addition  
**Name:** HARRIS, AUGUSTUS  
**Address:** 5154 BRECKENRIDGE PLACE #46  
**City-St-Zip:** WEST PALM BEACH, FL 33417 US**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: JAMES WILKERSON

D

07/02/2009

Electronic Signature of Signing Officer or Director

Date