2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0900000016

FILED Sep 10, 2010 Secretary of State

Entity Name: NEW COVENANT CULTURAL CENTRE, INC.

Current Principal Place of Business: New Principal Place of Business:

2700 PARTIN SETTLEMENT 2553 E. IRLO BRONSON MEMORIAL HIGHWAY

KISSIMMEE, FL 34744 KISSIMMEE, FL 34744

Current Mailing Address: New Mailing Address:

2700 PARTIN SETTLEMENT 2553 E. IRLO BRONSON MEMORIAL HIGHWAY

KISSIMMEE, FL 34744 KISSIMMEE, FL 34744

FEI Number: 61-1585189 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WOLLISTON, ALVIN R

1831 LEE JANZEN DRIVE

KISSIMMEE, FL 34744 US

MAXWELL, ROMANDA

2812 EAGLE EYE CT

KISSIMMEE, FL 34746 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: ROMANDA J. MAXWELL 09/10/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: WOLLISTON, ALVIN R

Address: 2553 E. IRLO BRONSON MEMORIAL HIGHWAY

City-St-Zip: KISSIMMEE, FL 34744

Title: ∨

Name: WOLLISTON, BARBARA G

Address: 2553 E. IRLO BRONSON MEMORIAL HIGHWAY

City-St-Zip: KISSIMMEE, FL 34744

Title: A

Name: MAXWELL, ROMANDA J Address: 2812 EAGLE EYE CT City-St-Zip: KISSIMMEE, FL 34746

Title: T

Name: HARRISON, GIRVIN
Address: 11742 SIR WINSTON WAY
City-St-Zip: ORLANDO, FL 32824

I hereby 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 all other like empowered.

SIGNATURE: ALVIN R. WOLLISTON PRES 09/10/2010