

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12958

FILED
Apr 30, 2012
Secretary of State

Entity Name: COVENANT COMMUNITY CHURCH OF HAINES CITY, INC.

Current Principal Place of Business:

2795 NORTH 10TH STREET
HAINES CITY, FL 33844

New Principal Place of Business:

280 PATTERSON ROAD
SUITE 2
HAINES CITY, FL 33844

Current Mailing Address:

P.O. BOX 1318
HAINES CITY, FL 33845

New Mailing Address:

FEI Number: 59-2781223 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BAKER, ANTHONY J PRES
2518 CREST DRIVE
HAINES CITY, FL 33844 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
Name: BAKER, ANTHONY J.
Address: 2518 CREST DR
City-St-Zip: HAINES CITY, FL 33844 US

Title: VD
Name: RATLIFF, LORENZO
Address: P O BOX 1318
City-St-Zip: HAINES CITY, FL 33845 US

Title: SD
Name: RATLIFF, STACY
Address: P O BOX 1318
City-St-Zip: HAINES CITY, FL 33845 US

Title: T
Name: WEST, BETTYE D
Address: P O BOX 1318
City-St-Zip: HAINES CITY, FL 33845 US

Title: TRUS
Name: EVANS, NORRIS TRUSTEE
Address: 1412 WOOD AVENUE
City-St-Zip: HAINES CITY, FL 33844 US

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: ANTHONY J. BAKER

PD

04/30/2012

Electronic Signature of Signing Officer or Director

Date