

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2009
Secretary of State**

DOCUMENT# N19206

Entity Name: NEW COVENANT BAPTIST CHURCH OF BROOKSVILLE, INC.

Current Principal Place of Business:

11014 N BROAD ST
BROOKSVILLE, FL 34605 US

New Principal Place of Business:

Current Mailing Address:

936 HIGHWAY 41 SOUTH
INVERNESS, FL 34450 US

New Mailing Address:

FEI Number: 59-2202975 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADDOX, JOSEPH
936 HIGHWAY 41 SOUTH
INVERNESS, FL 34450 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: MADDOX, JOSEPH
Address: 936 HIGHWAY 41 SOUTH
City-St-Zip: INVERNESS, FL 34450

Title: T () Delete
Name: KELL, GREG
Address: 320 S MONTGOMERY AVE
City-St-Zip: INVERNESS, FL 34450

Title: T () Delete
Name: GANT, ROBERT
Address: 15128 HANKLA RD
City-St-Zip: MASARYTOWN, FL 34604

Title: T () Delete
Name: SANTERELLI, JOSEPH
Address: 21169 POWELL RD
City-St-Zip: BROOKSVILLE, FL 34604

Title: T () Delete
Name: RITTER, ALAN
Address: PO BOX 578
City-St-Zip: HOMOSASSA, FL 34487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JOSEPH MADDOX

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date