

# 2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N25236

FILED  
Oct 08, 2013  
Secretary of State

**Entity Name:** COVINGTON & ASSOCIATES, INC.

**Current Principal Place of Business:**

532 DR. M. M. BETHUNE BLVD.  
DAYTONA BEACH, FL 32114 US

**New Principal Place of Business:**

**Current Mailing Address:**

532 DR. M. M. BETHUNE BLVD.  
DAYTONA BEACH, FL 32114 US

**New Mailing Address:**

**FEI Number:** 59-2880288

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COVINGTON, GARRETTE  
532 DR. BETHUNE BLVD  
DAYTONA BEACH, FL 32114 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:** GARRETTE COVINGTON

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** COVINGTON, SYLVESTER  
**Address:** 532 DR. MARY M. BETHUNE BLVD  
**City-St-Zip:** DAYTONA BEACH, FL 32114

**Title:** D  
**Name:** COVINGTON, GARRETTE B.  
**Address:** 532 DR. MARY M. BETHUNE BLVD  
**City-St-Zip:** DAYTONA BEACH, FL 32114

**Title:** DVP  
**Name:** ROSS, JAKE  
**Address:** 315 ORANGE AVE  
**City-St-Zip:** DAYTONA BEACH, FL 32114

**Title:** D  
**Name:** CARROLL, CHARLES  
**Address:** 532 DR. M. M. BETHUNE BLVD.  
**City-St-Zip:** DAYTONA BEACH, FL

**Title:** D  
**Name:** ROBINSON, STEVEN  
**Address:** 533 SEABREEZE BLVD SUITE 300  
**City-St-Zip:** DAYTONA BEACH, FL 32118

**Title:** DT  
**Name:** HALE, JEAN A  
**Address:** 220 S RIDGEWOOD AVE  
**City-St-Zip:** DAYTONA BEACH, FL 32114

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:** GARRETTE COVINGTON

RA

10/08/2013

Electronic Signature of Signing Officer or Director

Date