

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28981

FILED  
Mar 14, 2010  
Secretary of State

**Entity Name:** NEW COVENANT HOLINESS DELIVERANCE CHURCH OF LAKE PLACID, FLORIDA, INC.

**Current Principal Place of Business:**

152 ANDERSON STREET  
LAKE PLACID, FL 33852

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2737  
LAKE PLACID, FL 33862 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

SHOLTZ, JOHNNIE JR  
152 ANDERSON ST  
LAKE PLACID, FL 33852 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  
Name: CHAPPLE, PRUDENCE  
Address: 104 CURVE ST  
City-St-Zip: LAKE PLACID, FL 33852

Title: VD  
Name: SHOLTZ, BEULAH M  
Address: 152 ANDERSON STREET  
City-St-Zip: LAKE PLACID, FL 33852

Title: S  
Name: WYCHE, MARY L  
Address: 153 MAIN STREET  
City-St-Zip: LAKE PLACID, FL 33852

Title: D  
Name: WYCHE, ELLIOT SR  
Address: 153 MAIN STREET  
City-St-Zip: LAKE PLACID, FL 33852

Title: D  
Name: CRENSHAW, LAMAR  
Address: 104 CARVER STREET  
City-St-Zip: LAKE PLACID, FL 33852

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: JOHNNIE SHOLTZ JR

D

03/14/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date