

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45447

FILED
Apr 26, 2012
Secretary of State

Entity Name: EVERLASTING COVENANT FAITH REVIVAL CENTER, INC.

Current Principal Place of Business:

2342 N, F ST
PENSACOLA, FL 32501 US

New Principal Place of Business:

Current Mailing Address:

1707 NORTH GARY AVE.
PENSACOLA, FL 32505 US

New Mailing Address:

FEI Number: 59-3085671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HARRELL, MATTIE P.
1707 N. GARY AVE.
PENSACOLA, FL 32505 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: HARRELL, MATTIE P.
Address: 1707 N. GARY AVE.
City-St-Zip: PENSACOLA, FL 32505 US

Title: D
Name: HARRELL, ROBERT M.
Address: 1707 N. GARY AVE.
City-St-Zip: PENSACOLA, FL 32505 US

Title: D
Name: WHITE, PAUL A.
Address: 1707 N. GARY AVE.
City-St-Zip: PENSACOLA, FL 32505 US

Title: D
Name: SCOTT, CHRISTINA
Address: 1707 N. GARY AVE.
City-St-Zip: PENSACOLA, FL 32505 US

Title: D
Name: HARRELL, MOSES LEESHUN
Address: 1707 N. GARY AVE.
City-St-Zip: PENSACOLA, FL 32505 US

Title: D
Name: HARRELL, ROBERT LEE
Address: 1707 N. GARY AVE.
City-St-Zip: PENSACOLA, FL 32505 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: PAUL A. WHITE

D

04/26/2012

Electronic Signature of Signing Officer or Director

Date