## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 13 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N46069

(3)

COVENANT FELLOWSHIP, INC.

001211	ANTI LELECTION IN 1110				
Principal Place of Business		Mailing Address		4 IBBNINGLANK OLEMBERG RENA GRAND BOND TON BROWN BYON BURN BYON BARIL BARIL BARIL BARIL BARIL	
609 TELFAIR BRANDON FL 33511		609 TELFAIR Brandon FL 33510-2912			
				3. Date Incorporated or Qualified 11/18/1991	3a. Date of Last Report 01/30/1996
	ace of Business	2a. Mailing Address		4. FEI Number 59-3093377	Applied For
Suite, Apt.	#. elc.	Suite, Apt. #, etc.			Not Applicable  58.75 Additional
22	., •	27		5. Certificate of Status Desired	Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23	1 On the	28	Country	Trust Fund Contribution	Added to Fees
Ζιρ <b>24</b>	Country 25	Zip 29	30	This corporation has liability for in Florida Statutes	intangible tax under s. 199.032,  Yes X No
[27]	9. Name and Address of Currer		1901	10. Name and Address of New Re	
			81 Name		
BAUKNIGHT, TOMMY			82 Street A	ddress (P.O. Box Number is Not Acceptab	ole)
511 ALM			00		
BRANDO	N FL 33511		83		
			84 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 617.050	22 and 617.1508, Florida Statut	les, the above-named o	orporation submits this statement for the p	<u> </u>
office or re	egistered agent, or both, in the State of familiar with, and accept the oblig	of Florida, Such change was ations of Section 617 0503, Fl	authorized by the corporation of	orporation submits this statement for the poration's board of directors. I hereby accept	of the appointment as registered
SIGNATURE	Triamilia With and accept the cong	allons of scotlon strictor, re	onda otatotos.		
SIGNATORE	Signature, typed or printed name of registered ag		E: Registered Agent signature re		DATE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PD POLINTOFF CHARLES	☐ DELETE	1.1 VITLE		Change Addition
NAME. STREET ADDRESS	ROUNTREE, CHARLES 512 LITHIA WAY		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	BRANDON FL		1.4 CITY-ST-ZIP		
TITLE	VD	DELETE	2.1 TITLE	······································	☐ Change ☐ Addition
NAME	HARRELL, EMORY J.		2.2 NAME		
STREET ADDRESS	609 TELFAIR		2.3 STREET ADDRESS		
CITY-ST-ZIP	BRANDON FL		2. 4 CITY-ST-ZIP		
TITLE	S COLORA CELANDA	☐ DELETE	3.1 TITLE		Change Addition
NAME	WICKES, LELAND L		3.2 NAME 3.3 STREET ADDRESS		
STREE1 ADDRESS CITY-ST-ZIP	240 FAITHWAY DR SEFFNER FL		3.4 CITY-ST-ZIP		•
TITLE	TD	DELETE	4.1 TITLE	THE CONTRACT OF THE CONTRACT O	Change Addition
NAME	BAUKNIGHT, TOMMY		4.2 NAME		
STREET ADDRESS	511 ALMA DR.		4.3 STREET ADDRESS		
CITY-ST-ZIP	BRANDON FL		4.4 CITY-ST-ZIP		
TITLE	AS	☐ DELETE	5.1 TITLE		Change Addition
NAME	EARHART, PHILIP		5.2 NAME		
STREET ADDRESS	1322 OAK VALEY DR SEFFNER FL		5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	OCTTINEN FL	☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CrTY - ST - ZiP			6.4 CITY-ST-ZIP		
l informatio	in indicated on this annual report or	supplemental annual report is	true and accurate and t	ated in Section 119.07(3)(i), Florida Statute that my signature shall have the same lega	al effect as if made under cath: that
I am an o	fficer or director of the corporation on Block 12 or Block 13 if changed, or	or the receiver or trustee empore	wered to execute this re	port as required by Chapter 617 Florida S	Statutes and that my name