2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# N48011

Entity Name: COVENANT CENTRE, INC.

Current Principal Place of Business:

9153 ROAN LANE
PALM BEACH GARDENS, FL 33403 US

New Principal Place of Business:

Current Mailing Address:

9153 ROAN LANE
PALM BEACH GARDENS, FL 33403 US

New Mailing Address:

FEI Number: 65-0338166 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BENZ, NORMAN D.
9153 ROAN LANE
PALM BEACH GARDENS, FL 33403 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: DP ( ) Delete
Name: BENZ, NORMAN D.,
Address: 10254 ALLAMANDA CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: DV ( ) Delete
Name: VARNADORE, ROBERT,
Address: 6370 DRAKE STREET
City-St-Zip: JUPITER, FL 33458

Title: DT ( ) Delete
Name: COCUZZA, LEE,
Address: 8590 KELSO DR.
City-St-Zip: JUPITER, FL 33458

Title: DS ( ) Delete
Name: BAUDHUIN, JOHN
Address: 4422 LACEY OAK DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

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 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: NORMAN BENZ DP 04/24/2007

Electronic Signature of Signing Officer or Director — Date