

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N93000001199 (9)

1. Corporation Name

COVENANT COMMUNITY DEVELOPMENT CORPORATION



Principal Place of Business

500 COLLEGE TERR.  
HOMESTEAD FL 33030

Mailing Address

500 COLLEGE TERR.  
HOMESTEAD FL 33030

2. Principal Place of Business

21 1634 NW. 6th Avenue

Suite, Apt. #, etc.

22

City & State

23 Florida City, Florida

Zip

24 33034

Country

25 U.S.A.

2a. Mailing Address

26 P.O. Box 900370

Suite, Apt. #, etc.

27

City & State

28 Homestead, FL

Zip

29 33090-0370

Country

30 U.S.A.

3. Date Incorporated or Qualified

03/05/1993

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0390499

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

NEHEMIAH DAVIS  
500 COLLEGE TERRACE  
HOMESTEAD FL 33030

10. Name and Address of New Registered Agent

81

Name

Nehemiah Davis

82

Street Address (P.O. Box Number is Not Acceptable)

1634 NW. 6th Avenue

83

84

City

Florida City,

FL

85

Zip Code

33034

11. Pursuant to the provisions of Sections 617.0562 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

*Nehemiah Davis*  
Signature, typed or printed name of registered agent and title if applicable

Nehemiah Davis, Executive Director 2/21/96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD

☐ DELETE

NAME

ANDREWS ISRAEL

STREET ADDRESS

561 N.W. 3RD. ST.

CITY - ST - ZIP

FLORIDA CITY FL 33030 33034

TITLE

VP

☐ DELETE

NAME

RILEY JULIUS

STREET ADDRESS

684 N.W. 9TH ST.

CITY - ST - ZIP

FLORIDA CITY FL 33034

TITLE

SD

☐ DELETE

NAME

COLE, MARY LOUISE

STREET ADDRESS

141 SW 5TH 22025 S.W. 87th Avenue

CITY - ST - ZIP

MIAMI FL Cutler Ridge, FL 33190

TITLE

TD

☐ DELETE

NAME

JENSEN, BOB

STREET ADDRESS

1550 N. KROME AVE.

CITY - ST - ZIP

HOMESTEAD FL 33030

TITLE

D

☐ DELETE

NAME

BALDWIN DARIN

STREET ADDRESS

743 N.W. 6TH COURT P.O. Box 343045

CITY - ST - ZIP

FLORIDA CITY FL 33034

TITLE

D

☐ DELETE

NAME

BUCKLEY ETHEL

STREET ADDRESS

712 N.W. 6TH COURT 7th Avenue

CITY - ST - ZIP

FLORIDA CITY FL 33034

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PD

☒ Change ☐ Addition

1.2 NAME

Andrews Israel

1.3 STREET ADDRESS

567 N.W. 3rd Street

1.4 CITY - ST - ZIP

Florida City, FL 33034

2.1 TITLE

VP

☒ Change ☐ Addition

2.2 NAME

Riley Julius

2.3 STREET ADDRESS

684 N.W. 9th Street

2.4 CITY - ST - ZIP

Florida City, FL 33034

3.1 TITLE

SD

☒ Change ☐ Addition

3.2 NAME

Cole Mary Louise

3.3 STREET ADDRESS

22025 S.W. 87th Avenue

3.4 CITY - ST - ZIP

Cutler Ridge, FL 33190

4.1 TITLE

TD

☒ Change ☐ Addition

4.2 NAME

Jensen BoB

4.3 STREET ADDRESS

1550 N. Krome Avenue

4.4 CITY - ST - ZIP

Homestead, FL 33030

5.1 TITLE

D

☒ Change ☐ Addition

5.2 NAME

Baldwin Darin

5.3 STREET ADDRESS

N/A P.O. Box 343045

5.4 CITY - ST - ZIP

Florida City, FL 33034-3045

6.1 TITLE

D

☒ Change ☐ Addition

6.2 NAME

Buckley Ethel

6.3 STREET ADDRESS

712 N.W. 7th Avenue

6.4 CITY - ST - ZIP

Florida City, FL 33034

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Isaac J. Chism*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/96

Date

305-245-6211

Daytime Phone #

CR2E037 (12/95)

**COVENANT COMMUNITY DEVELOPMENT CORPORATION  
BOARD OF DIRECTORS**

REVISED 1/10/96

Section 13 - Changes

- 1.1 PD - President
- 1.2 Andrews, Israel J.
- 1.3 567 N.W. 3rd Street
- 1.4 Florida City, FL 33034
  
- 2.1 VP - Vice President
- 2.2 Riley, Julius
- 2.3 684 N.W. 9th Street
- 2.4 Florida City, FL 33034
  
- 3.1 SD - Secretary
- 3.2 Louise, Mary C.
- 3.3 22025 S.W. 87th Avenue
- 3.4 Cutler Ridge, FL 33190
  
- 4.1 TD - Treasurer
- 4.2 Jensen, Bob
- 4.3 1550 N. Krome Avenue
- 4.4 Homestead, FL 33030
  
- 5.1 D - Director
- 5.2 Baldwin, Darin
- 5.3 N/A P.O. Box 343045
- 5.4 Florida City, FL 33034
  
- 6.1 D - Director
- 6.2 Buckley, Ethel
- 6.3 712 N.W. 7th Avenue
- 6.4 Florida City, FL 33034