## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000003132

FILED Feb 17, 2011 Secretary of State

Entity Name: COVENANT LIFE DELIVERANCE CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

8720 NW 44TH ST 7636 MARGATE BLVD., SUNRISE, FL 33351 US MARGATE, FL 33063 US

Current Mailing Address: New Mailing Address:

8720 NW 44TH ST 6324 OCEAN DRIVE

SUNRISE, FL 33351 US MARGATE, FL 33063 US

FEI Number: 65-0209493 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

ARMSTRONG, MARLENE A ESQ. GORDON, JOHN M BISHOP 1000 E. ATLANTIC BOULEVARD 6324 OCEAN DRIVE SUITE 204 MARGATE, FL 33063 US

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: JOHN GORDON 02/17/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

POMPANO BEACH, FL 33060 US

Title: VC

 Name:
 GORDON, JOHN

 Address:
 8720 NW 44TH STREET

 City-St-Zip:
 SUNRISE, FL 33351 US

Title: D

 Name:
 GORDON, LINDA

 Address:
 8720 NW 44TH STREET

 City-St-Zip:
 SUNRISE, FL 33351 US

Title: C

 Name:
 BLAIR, HERRO

 Address:
 8720 NW 44TH ST

 City-St-Zip:
 SUNRISE, FL 33351

Title: [

 Name:
 DAVIS, BETHEL Y

 Address:
 8720 NW 44TH ST

 City-St-Zip:
 SUNRISE, FL 33351

Title:

 Name:
 BERNARD, JOYCE

 Address:
 8720 NW 44TH ST

 City-St-Zip:
 SUNRISE, FL 33351

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: JOHN GORDON VC 02/17/2011