2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# N94000004156

Entity Name: NEW COVENANT MINISTRIES OF ORANGE PARK, INC.

Current Principal Place of Business:

530 MADERIA DR
ORANGE PARK, FL 32073 US

New Principal Place of Business:

Current Mailing Address:

530 MADERIA DR
ORANGE PARK, FL 32073 US

New Mailing Address:

FEI Number: 59-3270332 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JOHNSON, RICHARD
530 MADERIA DR
ORANGE PARK, FL 32073 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: TRP ( ) Delete
Name: JOHNSON, RICHARD
Address: 530 MADERIA DR
City-St-Zip: ORANGE PARK, FL 32073

Title: TVST ( ) Delete
Name: JOHNSON, VERONICA D
Address: 530 MADERIA DR
City-St-Zip: ORANGE PARK, FL 32073

Title: TV ( ) Delete
Name: HEAFER, CHARLES
Address: 6871 KETTLE CREEK DR
City-St-Zip: JACKSONVILLE, FL 32221

Title: TV ( ) Delete
Name: BURTON, WILLIE
Address: 3904 BRAMBLE ROAD
City-St-Zip: JACKSONVILLE, FL 32210

Title: TV ( ) Delete
Name: HAYNES, CHARLES
Address: 1245 GRANT STREET
City-St-Zip: JACKSONVILLE, FL 32202

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:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: VERONICA D. JOHNSON TVST 05/01/2008
Electronic Signature of Signing Officer or Director Date