

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 14 PM 2:23**

DOCUMENT # N94000006347 (8)

1. Corporation Name

NEW COVENANT COLLEGE OF MINISTRY, INC.

Principal Place of Business

Mailing Address

**1011 W. INTERNATIONAL SPEEDWAY BLVD.
DAYTONA BEACH FL 32114**

**1011 W. INTERNATIONAL SPEEDWAY BLVD.
DAYTONA BEACH FL 32114**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/30/1994

3a. Date of Last Report

4. FEI Number

59-3284915

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☐

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

25 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**MORRIS, RICHARD S
1011 W. INTERNATIONAL SPEEDWAY BLVD.
DAYTONA BEACH FL 32114**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Registered Agent

2/10/95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
NAME **CAIN, A. MARVIN**
STREET ADDRESS **134 WESWTHOOD DRIVE**
CITY - ST - ZIP **DAYTONA BEACH FL 32119**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE **D**
NAME **MORRIS, RICHARD S**
STREET ADDRESS **621 LENOX AVENUE**
CITY - ST - ZIP **DAYTONA BEACH FL 32118**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE **D**
NAME **VAROL, MEZ**
STREET ADDRESS **552 PELICAN BAY DRIVE**
CITY - ST - ZIP **DAYTONA BEACH FL 32119**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE **D**
NAME **LUND, GORDON C**
STREET ADDRESS **490 N. YONGE STREET**
CITY - ST - ZIP **ORMOND BEACH FL 32174**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE **D**
NAME **MEYER, AL**
STREET ADDRESS **352 JOY ROAD**
CITY - ST - ZIP **SOUTH DAYTONA FL 32119**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE **D**
NAME **SANFORD, EDWARD**
STREET ADDRESS **1102 MORGAN ROAD**
CITY - ST - ZIP **PORT ORANGE FL 32119**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(9)(b), Florida Statutes. I further certify 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 and made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to conduct the report as required by Chapter 637, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE

Richard S. Morris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/95

904-257-5001