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Aug 18 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N95000005777 (6)  
1. Corporation Name  
WHITESTONE EVANGELICAL COVENANT CHURCH, INC.



Principal Place of Business Mailing Address  
4655 POINCIANNA DR. PENSACOLA FL 32526  
4655 POINCIANNA DR. PENSACOLA FL 32526-2034

\* 596-15-3868  
3. Date Incorporated or Qualified 01/02/1996  
3a. Date of Last Report 1/02/1997  
4. FEI Number 596-15-3868  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
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. 26 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  
GOETZ, DAVID C  
4655 POINCIANNA DR.  
PENSACOLA FL 32526

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 617.0502 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 ~~David C. Goetz~~ DAVID C. GOETZ David C. Goetz Aug. 13, '97

12. OFFICERS AND DIRECTORS

TITLE	PASTOR - D	<input type="checkbox"/> DELETE
NAME	DAVID C. GOETZ	
STREET ADDRESS	4655 POINCIANNA DR.	
CITY - ST - ZIP	PENSACOLA, FL. 32526	
TITLE	SEC/TREAS.	<input type="checkbox"/> DELETE
NAME	CLAIRE NEWCOMB	
STREET ADDRESS	1914 N. 60th. Ave.	
CITY - ST - ZIP	PENSACOLA, FL. 32504	
TITLE		<input checked="" type="checkbox"/> DELETE
NAME	GARRY CHANDLER	
STREET ADDRESS	6609 Chelsea St.	
CITY - ST - ZIP	PENSACOLA, FL. 32506	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	JOAN A. GOETZ
3.3 STREET ADDRESS	4655 POINCIANNA DR.
3.4 CITY - ST - ZIP	PENSACOLA, FL. 32526
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 ~~David C. Goetz~~ David C. Goetz 3/16/1997 OED JES 0111

CR2E037 (9/96)