

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90064 013 ****61.25

DOCUMENT # N96000000969

1. Entity Name

**FIRST COVENANT CHURCH OF THE LORD JESUS
CHRIST OF THE APOSTOLIC FAITH, INC.**



Principal Place of Business

**C/O JOSEPH LAW, PASTOR
148 NW 34TH AVE
FT LAUDERDALE FL 33311**

Mailing Address

**C/O JOSEPH LAW, PASTOR
148 NW 34TH AVE
FT LAUDERDALE FL 33311**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LAW, JOSEPH
148 N W 34TH AVENUE
FT LAUDERDALE FL 33311**

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW: FEE IS \$61.25
Due By: May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **LAW, JOSEPH**
STREET ADDRESS **148 NW 34TH AVENUE**
CITY-ST-ZIP **FT LAUDERDALE FL 33311**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☒ Delete
NAME **HARRIS, ALBERTA**
STREET ADDRESS **148 N W 34TH AVENUE**
CITY-ST-ZIP **FT LAUDERDALE FL 33311**

TITLE **SD** ☒ Change ☐ Addition
NAME **VIVIAN LAW**
STREET ADDRESS **148 N.W. 34th Ave**
CITY-ST-ZIP **Fort Lauderdale, FL 33311**

TITLE **TD** ☒ Delete
NAME **PARKER, ELAINE**
STREET ADDRESS **661 ARIZONA AVE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33311**

TITLE **TD** ☒ Change ☐ Addition
NAME **HILMA SCHUMAKER**
STREET ADDRESS **5860 N.W. 12TH COURT**
CITY-ST-ZIP **SUNRISE, Florida 33313**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Pastor Joseph Law*

954-327-3053