DOCU 1. Entity Nan	MENT # <b>N97000</b> 0		FILED					
NEW CO	OVENANT INTERNATIONAL TH	ieological seminar	Υ,		4, 2000 etary of			
Principal Place of Business		Mailing Address			-2000 90113 001			
4117 ALPINA COURT. NORTH LAKE WORTH FL 33436		4117 ALPINA COURT. NORTH LAKE WORTH FL 33436-3323						
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Do	O NOT WRITE IN THIS	SPACE		
City & State		City & State		4. FEI Number	0473019		plied For t Applicabl	
Zip	Country	Zip	Country	5. Certificate of Statu	s Desired	\$8.75 Add Fee Required		
DYSON, F 66 PAXFO BOYNTON			Street Addr	ess (P.O. Box Number is Not	Acceptable)			
SIGNATURE	s named entity submits this statement for  Signature, typed or printed name of registered agent ar  FILE NOW: FEE IS \$61.25		egistered Agent signature re		DATE  Make Check  Departmen			
10.	OFFICERS AND DIR	ECTORS	11.	I ADDITIONS/CHANGES	TO OFFICERS AND D	ĪRĒCTORS IN		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DYSON, KEVIN 66 PAXFORD LANE BOYNTON BEACH FL 33462 3:	□ Delate	STREET ADDRESS 1	NG, Richard B. 484 Ala Hēkili tonolula "Han	Pl4c€	☐ Change	Additio	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Dyson, Pamela Joy 66 Paxford Lane Boynton Beach FL 32462 32	☐ Delete	TITLE D;	CUTTER WORTH, IR 14 SOMERSET RA MT. ROSKIU, AUC	n P.	□ Change	Additio	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRIGGS, DAVID WAYNE 1835 CARANDIS ROAD WEST PALM BEACH FL 33406	□ Delete	NAME B STREET ADDRESS 14	ERNARD SR., ALF 400 LINDEN BLVE BROOKLYN NY 11	DNSO"RF"	☐ Change	Additio	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PETERS, TOMMY C 4117 ALPINA COURT, NORTH LAKE WORTH FL 33436	□ Defete	NAME STREET ADDRESS CITY-ST-ZIP	AISBITT, RUSSEZ 506 Backen bei Friendswood, T	ANTHON My Circle X 77546.	Change	Additio	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Additio	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		·	☐ Change	☐ Additio	
indicated of the cor	Lcertify that the information supplied with a formation supplied with a forthis report or supplemental report is a poration or the receiver or trustee empored, or on an attachment with a paddress, we	true and accurate and that my wered to execute this report as	signature shall have	the same legal effect as if m	ade under oath; that i nat my name appeare	am an officer of	or director Block 11 if	

SIGNATURE: