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**Secretary of State**

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**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N97000006052**

1. Corporation Name

**GLORIOUS COVENANT CHURCH, INC.**

Principal Place of Business

530 W. SWOOPE AVENUE  
SUITE A  
WINTER PARK FL 32789

Mailing Address

530 W. SWOOPE AVENUE  
SUITE A  
WINTER PARK FL 32789



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

29 Zip Country

3. Date Incorporated or Qualified

10/24/1997

4. FEI Number

59-3464891

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

9. Name and Address of Current Registered Agent

WEST, REGINA  
530 W. SWOOPE AVENUE  
SUITE A  
WINTER PARK FL 32789

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME REATHY, BARBARA  
STREET ADDRESS 786B ORIENTA AVE  
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32702

TITLE ☐ DELETE

NAME WEST, REGINA  
STREET ADDRESS 530 W SWOOPE AVE STE A  
CITY-ST-ZIP WINTER PARK FL 32789

TITLE ☐ DELETE

NAME HORSLEY, ANTHONY C.  
STREET ADDRESS 2508 CARVER ST  
CITY-ST-ZIP ORLANDO FL 32801

TITLE ☒ DELETE

NAME PREDDY, SONDR  
STREET ADDRESS 330 LAKE AVE #116A  
CITY-ST-ZIP MAITLAND FL 32751

TITLE ☐ DELETE

NAME DIXON, RHONDA V.  
STREET ADDRESS 530 W SWOOPE AVE #A  
CITY-ST-ZIP WINTER PARK FL 32789

TITLE ☒ DELETE

NAME MONTGOMERY, CHRISTINE  
STREET ADDRESS 631 NIBISCUS RD  
CITY-ST-ZIP CASSELBERRY FL 32708

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

Director  
Rosebush Simmons  
530 W Swoope Ave A  
Winter Park, FL 32789

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Secretary  
Brown-Taylor, Lenora  
266 S. Holly Avenue  
Sanford, FL 32771

14. I 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, with all other like empowered.

SIGNATURE:

*Regina West*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/99  
Date

(407) 262-1923  
Daytime Phone

CR2E037 (11/98)