

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 08, 2005
Secretary of State**

DOCUMENT# N98000001234

Entity Name: THE UPPER ROOM COVENANT MINISTRIES, INC.

Current Principal Place of Business:

7421 BELLE RIVER CT.
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

7421 BELLE RIVER CT.
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 59-3538475 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REEVES, G. GLENDA
7421 BELLE RIVER CT.
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: REEVES, G. GLENDA
Address: 7421 BELLE RIVER CT.
City-St-Zip: WINTER PARK, FL 32792

Title: D () Delete
Name: REEVES, LEWIS W JR
Address: 7421 BELLE RIVER CT.
City-St-Zip: WINTER PARK, FL 32792

Title: D () Delete
Name: REEVES, PERRY M
Address: 1123 WALT WILLIAMS RD. #34
City-St-Zip: LAKELAND, FL 33809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: REEVES, PERRY M
Address: 5305 OAK WAY DR.
City-St-Zip: LAKELAND, FL 33805

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: G. GLENDA REEVES

D

03/08/2005

Electronic Signature of Signing Officer or Director

_____ Date