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NONPROFIT CORPORATION ANNUAL REPORT
1999

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

547360 - 90021 - 28

DOCUMENT # N98000005846

1. Corporation Name
EVERLASTING COVENANT MINISTRIES, INC.

Principal Place of Business	Mailing Address
3500 NORH EAST 16TH TERRACE POMPANO BEACH FL 33074	3500 NORH EAST 16TH TERRACE POMPANO BEACH FL 33074

2. Principal Place of Business 21	2a. Mailing Address 26 6415W14TH STREET	3. Date Incorporated or Qualified 10/12/1998
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 65-0873961 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28 Deerfield Beach FL	5. Certificate of Status Desired ☑ $8.75 Additional Fee Required
Zip / Country 24 25	Zip / Country 29 33441 30 BROWARD	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

MITCHELL, EVELENE
405 N.W. 16TH AVENUE
POMPANO BEACH FL 33069

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE	TRUSTEE	☐ Change ☑ Addition
NAME	GONDER, ERNEST B SR.		1.2 NAME	LARRY WALKER	
STREET ADDRESS	641 S.W. 14TH STREET		1.3 STREET ADDRESS	2607 NW 10TH ST	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441		1.4 CITY-ST-ZIP	POMPANO BCH FL 33069	
TITLE	VP	☐ DELETE	2.1 TITLE	TRUSTEE	☐ Change ☑ Addition
NAME	GONDER, BARBARA J		2.2 NAME	DWIGHT JACKSON	
STREET ADDRESS	641 S.W. 14TH STREET		2.3 STREET ADDRESS	150 NW 11TH ST	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441		2.4 CITY-ST-ZIP	FT LAUDERDALE, FL 33313	
TITLE	ST	☐ DELETE	3.1 TITLE	TRUSTEE	☐ Change ☑ Addition
NAME	HENLEY, WILLIE M		3.2 NAME	BILLY WILLIAMS	
STREET ADDRESS	1522 N.W. 4TH AVENUE		3.3 STREET ADDRESS	7401 NW 76TH CT	
CITY-ST-ZIP	POMPANO BEACH FL 33060		3.4 CITY-ST-ZIP	TAMARAC, FL 33321	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
---1 ADDRESS			5.2 NAME		
ST-ZIP			5.3 STREET ADDRESS		
			5.4 CITY-ST-ZIP		
		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
---T ADDRESS			6.2 NAME		
ST-ZIP			6.3 STREET ADDRESS		
			6.4 CITY-ST-ZIP		

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: SECRETARY/PRESIDENT Ernest B. Gonder Sr. 4/29/99 (954) 421-8042
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)