

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006607

FILED  
Apr 15, 2010  
Secretary of State

**Entity Name:** COVENANT BUILDERS MINISTRIES, INC.

**Current Principal Place of Business:**

1019A WEST COLONIAL  
ORLANDO, FL 32804

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 720815  
ORLANDO, FL 32872

**New Mailing Address:**

**FEI Number:** 59-3523724

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NEWMAN, ALAN M SR.  
345 TIMBER GROVE CT.  
ORLANDO, FL 32828 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: PD  
Name: NEWMAN, ALAN M SR  
Address: 345 TIMBER GROVE CT.  
City-St-Zip: ORLANDO, FL 32828

Title: VD  
Name: NEWMAN, MARTHA  
Address: 345 TIMBER GROVE CT.  
City-St-Zip: ORLANDO, FL 32828

Title: D  
Name: HARRIS-WILCHROME, JUANITA  
Address: 1502 MUIR CIR  
City-St-Zip: CLERMONT, FL 34711

Title: DT  
Name: JOHNSON, LUTHER  
Address: 9711 RED CLOVER AVE  
City-St-Zip: ORLANDO, FL 32824

Title: D  
Name: JOHNSON, ELEAZIA M  
Address: 9711 RED CLOVER AVE  
City-St-Zip: ORLANDO, FL 32824

I hereby 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 all other like empowered.

SIGNATURE: MARTHA NEWMAN

VD

04/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date