

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006 8:00 am
Secretary of State

04-19-2006 90084 002 ***158.75

DOCUMENT # P04000035910

1. Entity Name
COVENANT PROPERTY INVESTMENTS, INC.



Principal Place of Business
**512 CYPRESS WAY E
NAPLES, FL 34110**

Mailing Address
**512 CYPRESS WAY E
NAPLES, FL 34110**

2. Principal Place of Business

5631 ENGLISH OAKS LN

Suite, Apt. #, etc.

3. Mailing Address

5631 ENGLISH OAKS LANE

Suite, Apt. #, etc.

City & State

NAPLES FL

City & State

NAPLES FL

Zip

34119

Country

Zip

34119

Country

04132006

Chg-P

CR2E034 (11/05)

4. FEI Number

20-0791076

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**DEAVER, CHERYL L CPA PA
3920 VIA DEL REY UNIT 4
BONITA SPRINGS, FL 34134**

7. Name and Address of New Registered Agent

Name
ROBERT DUNBAR

Street Address (P.O. Box Number is Not Acceptable)

5631 ENGLISH OAKS LANE

City
NAPLES

FL

Zip Code
34119

8. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/12/06

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PS
DUNBAR, ROBERT B
512 CYPRESS WAY E
NAPLES, FL 34110** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VT
DUNBAR, CHRISTINE T
512 CYPRESS WAY E
NAPLES, FL 34110** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
**5631 ENGLISH OAKS LANE
NAPLES FL 34119**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
**5631 ENGLISH OAKS LANE
NAPLES FL 34119**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
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CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/06 (239) 289-1712

Date

Daytime Phone #