

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000021528

FILED  
Feb 05, 2010  
Secretary of State

Entity Name: COVENANT CLOSING & TITLE SERVICES, INC.

**Current Principal Place of Business:**

4879 PALM COAST PARKWAY NW  
UNIT #5  
PALM COAST, FL 32137

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 350374  
PALM COAST, FL 321350374

**New Mailing Address:**

FEI Number: 65-1243221

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LE TELLIER, JOHN J  
4879 PALM COAST PARKWAY NW  
UNIT #5  
PALM COAST, FL 32137 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPST  
Name: LE TELLIER, VICTORIA  
Address: 19 WOODSHIRE LANE  
City-St-Zip: PALM COAST, FL 32164

Title: DV  
Name: LE TELLIER, JOHN J  
Address: 19 WOODSHIRE LANE  
City-St-Zip: PALM COAST, FL 32164

Title: D  
Name: STEVENSON, DALE R  
Address: 146 N LAKEWALK DR  
City-St-Zip: PALM COAST, FL 32137

Title: D  
Name: GORDON, JOHN D  
Address: BOX 354786  
City-St-Zip: PALM COAST, FL 32135

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN J. LE TELLIER

VP

02/05/2010

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

\_\_\_\_\_  
Date