

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000153457

FILED
Apr 16, 2007
Secretary of State

Entity Name: COVENANT KEEPERS UNLIMITED, INC.

Current Principal Place of Business:

1657 PORTSMOUTH LAKE DR
BRANDON, FL 33511

New Principal Place of Business:

3902 OLD BROOK LANE
PLANT CITY, FL 335667213 US

Current Mailing Address:

P O BOX 2278
BRANDON, FL 335092278 US

New Mailing Address:

FEI Number: 20-3840114 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIPP, STEPHEN R
1657 PORTSMOUTH LAKE DR
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

TRIPP, STEPHEN R
3902 OLD BROOK LANE
PLANT CITY, FL 335667213 US

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: _____

04/16/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TRIPP, STEPHEN R
Address: 1657 PORTSMOUTH LAKE DR
City-St-Zip: BRANDON, FL 33511

Title: VP () Delete
Name: TRIPP, CATHY M
Address: 1657 PORTSMOUTH LAKE DR
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TRIPP, STEPHEN R
Address: 3902 OLD BROOK LANE
City-St-Zip: PLANT CITY, FL 335667213

Title: VP (X) Change () Addition
Name: TRIPP, CATHY M
Address: 3902 OLD BROOK LANE
City-St-Zip: PLANT CITY, FL 335667213

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: STEPHEN R TRIPP

P

04/16/2007

Electronic Signature of Signing Officer or Director

Date