FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

FILED
95 MAY -1 AM 11:32

DOCUMENT # P94000085741 (4)

1. Corporate Name
COVINGTON ENTERPRISES, INC.

3204 SHADY PINE AVE.
ORLANDO FL 32792

Mailing Address
3204 SHADY PINE AVE
ORLANDO FL 32792 } Home

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21	641 W. Fairbanks Ave	26	Mailing Address
22	Suite, Apt # etc. 105	27	Suite, Apt # etc.
23	City & State Winter Park Fl	28	City & State
24	Zip 32789	29	Zip
25	County Orange	30	County

3. Date Incorporated or Qualified: 11/28/1994

3a. Date of Last Report:

4. FEI Number: 59-3283424 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MCDONALD, ROGER J
1218 EAST ROBINSON ST.
ORLANDO FL 32801

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

DPST
COVINGTON, ALBERT L
3204 SHADY PINE AVE.
ORLANDO FL 32792

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07, Florida Statutes. I further certify 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Albert L. Covington

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95 407 740-7266

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