

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004715

Entity Name: DAVIDIC COVENANT MINISTRIES INC.**Current Principal Place of Business:**521 S 21 AVE
HOLLYWOOD, FL 33020**Current Mailing Address:**521 S 21 AVE
HOLLYWOOD, FL 33020 US**FEI Number:** 37-1474247**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SMITH, ASONIA A
2043 MADISON ST
HOLLYWOOD, FL 33020 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:** ASONIA A SMITH

05/11/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name SMITH, ASONIA A
Address 2043 MADISON ST.
City-State-Zip: HOLLYWOOD FL 33020

Title D
Name RAMSAY, ANGELA
Address 521 S 21 AVE
City-State-Zip: HOLLYWOOD FL 33020

Title D
Name EDWARDS, LLOYD
Address 521 S 21 AVE
City-State-Zip: HOLLYWOOD FL 33020

Title VP
Name VERBOND, CARLITHA
Address 521 S 21 AVE
City-State-Zip: HOLLYWOOD FL 33020

Title SD
Name EDWARDS, MAR'NIQUE
Address 521 S 21 AVE
City-State-Zip: HOLLYWOOD FL 33020

Title TD
Name RAMSAY, TERRI- ANN
Address 521 S 21 AVE
City-State-Zip: HOLLYWOOD FL 33020

Title DIRECTOR
Name EDWARDS, MARY
Address 521 S 21 AVE
City-State-Zip: HOLLYWOOD FL 33020

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: MAR' NIQUE EDWARDS

SD

05/11/2017

Electronic Signature of Signing Officer/Director Detail

Date