

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000011075

**Entity Name:** COVENANT LIFE UNIVERSITY, INC.

**Current Principal Place of Business:**

11735 PLANTATION ROAD  
FORT MYERS, FL 33966

**Current Mailing Address:**

11735 PLANTATION ROAD  
FORT MYERS, FL 33966 US

**FEI Number: 59-2756180**

**Certificate of Status Desired: Yes**

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

DEATON, DAVID LDR.  
11735 PLANTATION ROAD  
FORT MYERS, FL 33966 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PCD  
Name DEATON, DAVID L  
Address 12169 LUCCA ST  
#101  
City-State-Zip: FORT MYERS FL 33966

Title VD  
Name DEATON, RYAN D  
Address 2227 TREEHAVEN CIRCLE  
City-State-Zip: FORT MYERS FL 33907

Title TREASURER, DIRECTOR  
Name NANTON, COLIN  
Address 4173 LEMONGRASS DRIVE  
City-State-Zip: FORT MYERS FL 33916

Title SECRETARY, DIRECTOR  
Name NANTON, CATHERINE  
Address 4173 LEMONGRASS DRIVE  
City-State-Zip: FORT MYERS FL 33916

*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: DAVID DEATON**

**PRESIDENT**

**01/04/2023**

Electronic Signature of Signing Officer/Director Detail

Date