

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000005044

**FILED**  
**Apr 16, 2013**  
**Secretary of State**  
**CC9847000818**

**Entity Name:** COVENANT BRIDE OF CHRIST MINISTRIES, INC.

**Current Principal Place of Business:**

1010 O'DONIEL DR.  
LAKELAND, FL 33809

**Current Mailing Address:**

P.O. BOX 90461  
LAKELAND, FL 33804

**FEI Number:** 59-3542503

**Certificate of Status Desired:** No

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

CAMPBELL, IRIS M  
1010 O'DONIEL DR.  
LAKELAND, FL 33809 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 PD  
Name CAMPBELL, IRIS M  
Address 1010 O'DONIEL DR.  
City-State-Zip: LAKELAND FL 33809

Title VT  
Name CAMPBELL, FRANK  
Address 1010 O'DONIEL DR.  
City-State-Zip: LAKELAND FL 33809

Title SD  
Name AGNINI, DONNA  
Address 214 FERNERY RD.  
City-State-Zip: LAKELAND FL 33809

*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:** IRIS M CAMPBELL

**P D**

**04/16/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date