

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 850278

FILED  
Jan 23, 2009  
Secretary of State

**Entity Name:** THE CHURCH OF GOD OF THE MOUNTAIN ASSEMBLY, INC.

**Current Principal Place of Business:**

256 N FLORENCE AVE  
JELLICO, TN 37762 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 157  
JELLICO, TN 37762 US

**New Mailing Address:**

**FEI Number:** 62-6012946

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ELLIS, HIRAM REV.  
6677 HAMPTON LANE  
INVERNESS, FL 34450 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HILL, WALTER D GEN OVR  
Address: 109 HAWK TRAIL  
City-St-Zip: KINGSTON, TN 37763

Title: VD ( ) Delete  
Name: WALDEN,, JAY  
Address: 114 WALDEN LANE  
City-St-Zip: JELLICO, TN 37762

Title: STD ( ) Delete  
Name: KILGORE, JAMES  
Address: 170 N FLORENCE AVE  
City-St-Zip: JELLICO, TN 37762

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: WALDEN,, JAY A AST G.O  
Address: 114 WALDEN LANE  
City-St-Zip: JELLICO, TN 37762

Title: STD (X) Change ( ) Addition  
Name: KILGORE, JAMES GS&T  
Address: 170 N FLORENCE AVE  
City-St-Zip: JELLICO, TN 37762

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES KILGORE

GS&T

01/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date