## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 716445** 

Entity Name: MOUNT OLIVE GARDENS NO.1, INC.

## **Current Principal Place of Business:**

1700 NW 6TH PLACE, #2-102 FORT LAUDERDALE, FL 33311

**Current Mailing Address:** 

P.O. BOX 26351

TAMARAC, FL 33320 US

FEI Number: 59-1403029 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CHANGE, AVOLENE PRESIDE 7482 NW 48 PLACE LAUDERHILL, FL 33319 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

**FILED** Mar 25, 2019

**Secretary of State** 

8670544575CC

Officer/Director Detail:

Title **PRESIDENT** Title **SECRETARY** 

CHANGE, AVOLENE Name DOROTHEA P PAYTON Name

Address 7482 NW 48TH PL Address PO BOX 26351

City-State-Zip: LAUDERHILL FL 33319 City-State-Zip: TAMARAC FL 33320

**DIRECTOR** Title Title **TREASURER** 

Name POLLARD, EDWARD INGRAM, ROBERT Name Address 5204 NW 67TH AVENUE Address 601 NW 46TH AVENUE LAUDERHILL FL 33319 City-State-Zip: City-State-Zip: PLANTATION FL 33317

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: AVOLENE CHANGE

**PRESIDENT** 

03/25/2019