

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

DOCUMENT# N19000000939

**Entity Name:** MOUNT AVERY MISSIONARY BAPTIST CHURCH  
INCORPORATED

**FILED**  
**Jan 07, 2023**  
**Secretary of State**  
**0195189657CC**

**Current Principal Place of Business:**

6750 MANLIE STREET  
ORLANDO, FL 32819

**Current Mailing Address:**

166 E KEENE ROAD  
APOPKA, FL 32703 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

BROWN, EVA MAE  
166 E KEENE ROAD  
APOPKA, FL 32703 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: EVA MAE BROWN**

**01/07/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD	Title	PD
Name	BROWN, B.L (PASTOR)	Name	MC FADDEN, BUDDY
Address	166 E KEENE ROAD	Address	6750 MANLIE STREET
City-State-Zip:	APOPKA FL 32703	City-State-Zip:	ORLANDO FL 32819
Title	OD	Title	OD
Name	ALLEN, TONY	Name	JENKINS, GENE
Address	6750 MANLIE STREET	Address	6750 MANLIE STREET
City-State-Zip:	ORLANDO FL 32819	City-State-Zip:	ORLANDO FL 32819
Title	SD	Title	CEO
Name	POLLOCK, ELLIS	Name	BROWN, EVA MAE
Address	4855 VICTORY DRIVE	Address	6750 MANLIE STREET
City-State-Zip:	ORLANDO FL 32808	City-State-Zip:	ORLANDO FL 32819

*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: ELLIS POLLOCK**

**BROTHER**

**01/07/2023**

Electronic Signature of Signing Officer/Director Detail

Date