

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40084

Entity Name: MOUNT OLIVE PRIMITIVE BAPTIST CHURCH OF JESUS CHRIST, INC.**Current Principal Place of Business:**406 N MYRTLE AVE
NEW SMYRNA BEACH, FL 32168-6615**Current Mailing Address:**406 N MYRTLE AVE
NEW SMYRNA BEACH, FL 32168-6615**FEI Number: 59-3047707****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BUTLER, FREDERICK L
185 BAY STREET
NEW SMYRNA BEACH, FL 32168 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	D
Name	WALDEN, JOSEPH T
Address	1310 IDLEWILD DR
City-State-Zip:	DAYTONA BEACH FL

Title	D
Name	FRANKLIN, GEORGE M
Address	604 N DUSS ST
City-State-Zip:	NEW SMYRNA BCH FL

Title	D
Name	BROWN, BERNICE
Address	409 WARREN AVENUE
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	D
Name	HAYNES, JAMES
Address	333 DIMMICK STREET
City-State-Zip:	NEW SMYRNA BCH FL

Title	D
Name	BUTLER, FREDERICK L
Address	185 BAY STREET
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	D
Name	BROWN, VERN
Address	409 WARREN AVENUE
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	PASTOR
Name	CLARK, CHARLIE
Address	4320 N. TROPICAL TRAIL
City-State-Zip:	MERRITT ISLAND FL 32953

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: FREDERICK L. BUTLER**CHAIRMAN TRUSTEE
BOARD****04/13/2014**

Electronic Signature of Signing Officer/Director Detail

Date