2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 17, 2008 8:00 am Secretary of State

1. Entity Name MOUNT DORA COMMUNITY CHURCH, INC.									04-17-2000	0 70000 0	23 ****6	1.23
Principal Place of Business Mailing Address 650 N DONNELLY ST. 650 N. DONNEL MOUNT DORA, FL 32757 US MOUNT DORA, F					57 U	ıs					N 518N 818N 818N	# 11
Principal Place of Business - No P.O. Box # 3			3. Mailing	3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				03312008	Chg-NP	CR2E03	37 (12/06)		
City & State			City & State				4. FEI Numbe 59-614	982		⊢	oplied For ot Applicable	
Zip	Zip Country		Zip	Zip C⊙.		intry		5. Certificate of Status Desired \$8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent Name						
KARR, NORMAN W. 2136 TOPPING PLACE						Street Address (P.O. Box Number is Not Acceptable)						
EUSTIS, FL 32735											٠.6	
						City				FL	Zip Code	
	named entity submit		or the purpose	of changing its	registere	ed office or	registered	d agent, or bot	h, in the State of F	lorida. I am i	familiar with,	and accept
bio obaga.	iana ar rogiator ya ag	, (
SIGNATURE .	Signature, typed or printed or	name of registered ager	t and title if applicab	de. (NOTE	Registere	d Agent signatur	re required wi	hen reinstating)		DATE		
Filling Fee is \$61.25 Due by May 1, 2008				9. Election Campaign Financing Trust Fund Contribution.				5.00 May B Added to Fees		Make checi orida Depar		
10.	м	OFFICERS AND D	RECTORS	☐ Detete	11.		AD	DITIONS/CH	ANGES TO OFFIC	ERS AND DI	RECTORS IN	10 Addition
NAME STREET ADDRESS	KARR, NORMAN			LI Dekte	NAM							
CITY-ST-ZIP	EUSTIS, FL 32726				STRE	ET ADORESS						
					CITY	-ST-ZIP						
TITLE .	P ROSS, DAVID			☐ Delete		-ST-ZIP					Change	Addition
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Indexect certain that the information supplied with this litting does not quality for the exemptions contained in Chapter 119. Florida Statutes, I further certain that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment/with an address, with all other like empowered.

SIGNATURE: