

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 29, 2008 08:00 AM
Secretary of State

DOCUMENT # 710991

1. Entity Name
MOUNT HERMON MINISTRIES, INC.



Principal Place of Business
**2856 DOUGLAS STREET
FORT MYERS, FL 33916**

Mailing Address
**P.O. BOX 9309
FORT MYERS, FL 33902 US**



02122008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2359625

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CHANEY, JAMES E SR.
227 S.E. 25TH TERRACE
CAPE CORAL, FL 33094**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000848783
03/12/08-80009-011 61.25

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
GLOVER, WILLIAM L APOSTLE
12902 IVORY STONE
FT MYERS, FL 33913**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CHANEY, JAMES E SR.
P.O. BOX 150634
CAPE CORAL, FL 33915**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
BROWN, ESSIE M
1731 DELAWARE AVE
FT MYERS, FL 33916**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WHITE, FREDERICK A DEACON
1400 BILLIE STREET
FT MYERS, FL 33916**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WILLIAMS, ISSAC DEACON
2856 DOUGLAS STREET
FORT MYERS, FL 33916**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: *Essie Mann Brown* **Essie M Brown**

2/26/08 **239-**

334-8075