

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 17, 2011  
Secretary of State**

DOCUMENT# 719349

**Entity Name:** MT. CARMEL METHODIST CHURCH OF FLORAL CITY, INC.

**Current Principal Place of Business:**

8004 S. FL AVENUE  
FLORAL CITY, FL 34436

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 286  
FLORAL CITY, FL 34436

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

LANGLEY, ALIDA V  
7950 S. CHORON TERRACE  
FLORAL CITY, FL 34436    US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LANGLEY, FLORENCE E  
Address: 7975 S BEDFORD RD  
City-St-Zip: FLORAL CITY, FL 34436

Title: T  
Name: HILLS, SARA  
Address: 3775 E. JEROME STREET  
City-St-Zip: INVERNESS, FL 34453

Title: T  
Name: WILLIAMS, DORA  
Address: 2984 WOODTHRUSH  
City-St-Zip: LECANTO, FL 34461

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: FLORENCE E LANGLEY

P

02/17/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date