

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741524

FILED
Apr 13, 2012
Secretary of State

Entity Name: MISSIONARY EVANGELIST OUTREACH CENTER HOLINESS CHURCH, INC.

Current Principal Place of Business:

1766 N.W. 95 STREET
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

C/O LA FARIES MORTIMER
3230 N.W. 151ST TERRACE
OPA LOCKA, FL 33054

New Mailing Address:

FEI Number: 65-0028303

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORTIMER, LA FARIES Y
3230 N.W. 151ST TERRACE
OPA LOCKA, FL 33054 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: PD
Name: KEMP, JOHNNY L
Address: 3950 N.W. 177TH STREET
City-St-Zip: CAROL CITY, FL 33055

Title: VD
Name: KEMP, PATTY L
Address: 3950 NW 177TH ST
City-St-Zip: CAROL CITY, FL 33055

Title: D
Name: MUMFORD, TADERRYL
Address: 1800 NW 85TH STREET
City-St-Zip: MIAMI, FL 33147

Title: SD
Name: MORTIMER, CHRISTINE
Address: 4230 NW 173 DR
City-St-Zip: CAROL CITY, FL 33055

Title: D
Name: PETERS, WILENA
Address: 20861 NW 9TH COURT #204
City-St-Zip: MIAMI, FL 33169

Title: T
Name: MORTIMER, LAFARIES
Address: 3230 N.W. 151ST TERRACE
City-St-Zip: OPA LOCKA, FL 33054

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: LAFARIES MORTIMER

RA

04/13/2012

Electronic Signature of Signing Officer or Director

Date