## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 746605** 

FILED Apr 18, 2006 Secretary of State

Entity Name: MOUNT MORIAH MISSIONARY BAPTIST CHURCH OF PALM BAY, FLORIDA, INC.

| Current Pi                                  | rincipal Place  | e of Business:                       | New Princ                                   | New Principal Place of Business:             |   |  |  |
|---|---|--------------------------------------|---|--|---|--|--|
| 2295 ADAN<br>PALM BAY                       | MS ST.<br>7, FL 32905                                 | US                                   |   |  |   |  |  |
| Current Mailing Address:                    |   |                                      | New Maili                                   | New Mailing Address:                         |   |  |  |
| 2295 ADAN<br>PALM BAY                       | MS ST.<br>7, FL 32905                                 | US                                   |   |  |   |  |  |
| FEI Number:                                 | 59-2419474  | FEI Number Applied For ( )           | El Number Not Appl                          | icable ( )                                   | Certificate of Status Desired ( )                                 |  |  |
| Name and                                    | Address of 0  | Current Registered Agent:            | Name and                                    | Address o                                    | of New Registered Agent:  |  |  |
| 2295 ADAN                                   | , HATTIE T.<br>MS ST.<br>, FL 32905                   | US                                   |   |  |   |  |  |
|   | named entity<br>of Florida.                           | submits this statement for the purpo | ose of changing i                           | ts registere                                 | d office or registered agent, or both,                            |  |  |
| SIGNATUF                                    | RE:   |                                      |   |  |   |  |  |
|   | Electron  | nic Signature of Registered Agent    |   |  | Date  |  |  |
| OFFICERS AND DIRECTORS:                     |   |                                      | ADDITION                                    | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |   |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | DS (<br>KENNEDY, HA<br>500 E. RYOLA<br>MELBOURNE,     | ND ST.                               | Title:<br>Name:<br>Address:<br>City-St-Zip: |  | () Change () Addition   |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | T (<br>MAPP, WILLIE<br>1403 E. GIBBS<br>MELBOURNE,    | SST.                                 | Title:<br>Name:<br>Address:<br>City-St-Zip: |  | () Change () Addition   |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | PD (<br>COCHRAN, ED<br>295 ROMAN AV<br>PALM BAY, FL   | /. NE                                | Title:<br>Name:<br>Address:<br>City-St-Zip: | 806 AACHE                                    | (X) Change()Addition<br>BENNIE PRES<br>N AVENUE NW<br>FL 32907 US |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | CD (<br>HARVIN, MOSE<br>1924 JACQUE:<br>MELBOURNE,    | S DRIVE                              | Title:<br>Name:<br>Address:<br>City-St-Zip: |  | () Change () Addition   |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | C (<br>WALKER, ANN<br>727 RANDOLP<br>PALM BAY, FL     | нѕт                                  | Title:<br>Name:<br>Address:<br>City-St-Zip: |  | () Change () Addition   |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | VD (<br>JONES, ERNE:<br>411 ULM RD. N<br>PALM BAY, FL | ···                                  | Title:<br>Name:<br>Address:<br>City-St-Zip: |  | ( ) Change ( ) Addition   |  |  |
|   |   |                                      |   |  |   |  |  |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BENNIE JACKSON PRES 04/18/2006