

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752768

FILED
Apr 05, 2009
Secretary of State

Entity Name: MT. CARMEL MISSIONARY BAPTIST CHURCH OF CITY POINT, INC.

Current Principal Place of Business:

3670 W. RAILROAD AVE.,
COCOA, FL 32926

New Principal Place of Business:

Current Mailing Address:

3670 W. RAILROAD AVE.,
COCOA, FL 32926

New Mailing Address:

FEI Number: 59-3119443 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THOMAS, JOHN P., JR
603 SOUTH KENTUCKY AVENUE
COCOA, FL 32922 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 () Delete
Name: THOMAS, JOHN P., JR,
Address: 603 SO KENTUCKY AVE
City-St-Zip: COCOA, FL 32922

Title: D () Delete
Name: MCNEIL, RONI
Address: 237 LEMON STREET
City-St-Zip: COCOA, FL 32922

Title: D () Delete
Name: HAMILTON, BETTY
Address: 3833 S DENTON CIRCLE
City-St-Zip: COCOA, FL 32926

Title: T () Delete
Name: SYLVESTER, GRANT
Address: 7101 HARTMAN
City-St-Zip: COCOA, FL 32927

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: C (X) Change () Addition
Name: LOVETT, LUTRICIA S
Address: 3656 W. RAILROAD AVE.
City-St-Zip: COCOA, FL 32926

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOHN P. THOMAS

P

04/05/2009

Electronic Signature of Signing Officer or Director

_____ Date