2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754348

FILED Apr 29, 2008 Secretary of State

Entity Name: MOUNT CALVARY NATIONAL CHURCH OF GOD, INC.

New Principal Place of Business: Current Principal Place of Business: 17500 SW 103 AVE PERRINE, FL 33157 **Current Mailing Address: New Mailing Address:** P.O. BOX 570208 PERRINE, FL 33157 FEI Number: 26-1605381 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCOTT, MELISSA 11120 SW 179TH ST MIAMI, FL 33157 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete FERGUSON, SYNTHEIST Name: Name: 10451 SW 177TH STREET Address: Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: Title: Title: () Delete () Change () Addition Name: SCOTT, MELISSA Name: Address: 11120 SW 179TH STREET Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: Title: () Delete Title: (X) Change () Addition MCNEILL, DAVID Name: ROLLE, LIVINGSTON J Name: 2630 STRICKLAND BRIDGE ROAD Address: Address: 7508 JAFFREY ROAD City-St-Zip: FAYETTEVILLE, NC 28306 City-St-Zip: FORT WASHINGTON, MD 20744 () Delete Title: Title: (X) Change () Addition OSBOURNE, GERGUSON L Name: Name: OSBOURNE, FERGUSON L Address: 8725 KIMBRO LN Address: 8725 KIMBRO LN City-St-Zip: FORT BELVOIR, VA 22060 City-St-Zip: FORT BELVOIR, VA 22060 Title: STD () Delete Title: () Change () Addition ROLLE, GRACE, Name: Name: 14291 POLK STREET Address: Address: City-St-Zip: MIAMI, FL City-St-Zip: Title: () Delete Title: () Change () Addition FERGUSON, PRINCE Name: Name: Address: 10451 SW 177 STREET Address: MIAMI, FL 33157 City-St-Zip: 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: MELISSA SCOTT PRES 04/29/2008