

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755376

FILED
Apr 11, 2007
Secretary of State

Entity Name: MOUNT OLIVE FREE WILL BAPTIST CHURCH, INC.

Current Principal Place of Business:

1450 E GAY ST
BARTOW, FL 33830 US

New Principal Place of Business:

Current Mailing Address:

MT OLIVE FREEWILL BAPTIST CHURCH INC
PO BOX 864
BARTOW, FL 33831 US

New Mailing Address:

FEI Number: 59-2570555 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RUDOLPH, CATHERINE
6215 JUBILEE LANE
LAKELAND, FL 33813 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: T () Delete
Name: TAYLOR, SYRITA
Address: 5802 HILLSIDE HGTS DR
City-St-Zip: LAKELAND, FL 33813

Title: S () Delete
Name: RUDOLPH, CATHERINE
Address: 6215 JUBILEE LN.
City-St-Zip: LAKELAND, FL 33813

Title: T () Delete
Name: DIXON, ELMER
Address: NINETH AVE.
City-St-Zip: BARTOW, FL 33830

Title: D () Delete
Name: LUSTER, VONNEY
Address: 308 CARLISTE RD
City-St-Zip: LAKELAND, FL 33813

Title: T () Delete
Name: TAYLOR, VERDELL
Address: 930 TEE CIRCLE WEST
City-St-Zip: BARTOW, FL 33830

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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 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: CATHERINE RUDOLPH

S

04/11/2007

Electronic Signature of Signing Officer or Director

Date