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Feb 18 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 758829

(6)

1. Corporation Name

MOUNT OLIVE AFRICAN METHODIST EPISCOPAL CHURCH,
OF GAINESVILLE, FLORIDA, INC.

Principal Place of Business

Mailing Address

721 S.E. 8TH STREET
GAINESVILLE FL 32601721 S.E. 8TH STREET
GAINESVILLE FL 32601-70313. Date Incorporated or Qualified
06/18/19813a. Date of Last Report
03/08/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

YOUNG, THELMA S
721 S.E. 8TH STREET
GAINESVILLE FL 32601

81 Name Oliver Simmons

82 Street Address (P.O. Box Number is Not Acceptable)
721 S. E. 8th Street

83

84 City Gainesville, FL 85 Zip Code 32601

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Rev. Oliver Simmons 1/30/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE
NAME YOUNG, THELMA S
STREET ADDRESS 721 S.E. 8TH STREET
CITY-ST-ZIP GAINESVILLE FL 326011.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME SIMMONS, OLIVER
1.3 STREET ADDRESS 721 S. E. 8TH STREET
1.4 CITY-ST-ZIP GAINESVILLE, FL 32601TITLE D ☐ DELETE
NAME TUCKER, CAROLYN M
STREET ADDRESS 5210 N.W. 24TH PLACE
CITY-ST-ZIP GAINESVILLE FL 326062.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME MINGO, GWENUEL W
STREET ADDRESS 721 S.E. 8TH STREET
CITY-ST-ZIP GAINESVILLE FL3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME STOVER, OTIS D
STREET ADDRESS 1608 S.E. 28TH PLACE
CITY-ST-ZIP GAINESVILLE FL 326014.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME JONES, ORIAN V
STREET ADDRESS 5834 N.E. 39TH BLVD.
CITY-ST-ZIP GAINESVILLE FL 326095.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rev. Oliver Simmons

1/30/97

(352) 378-9051

CR2E037 (9/96)