2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Apr 03, 2006 8:00 am Secretary of State **DOCUMENT #769071** 04-03-2006 90350 038 ****70.00 1. Entity Name MOUNT OLIVE AFRICAN METHODIST EPISCOPAL CHURCH OF FORT MYERS, INC. Principal Place of Business Mailing Address 4000-2754 ORANGE AVE 2754 ORANGE AVE PO BOX 1512 PO BOX 1512 FORT MYERS, FL 33902-8512 FORT MYERS, FL 33902-8512 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03012006 CR2E037 (11/05) Chg-NP Applied For City & State 4. FEI Number NOT APPLICABLE City & State Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MAYO, GEORGE Street Address (P.O. Box Number is Not Acceptable) 3249 C STREET FT MYERS, FL 33916 City Zip Code 8. 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. I am familiar with, and accept GEORGE MAYO SIGNATURE. \$5.00 May Be 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 Florida Department of State Trust Fund Contribution. Due by May 1, 2006 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Change ☐ Addition TO Delete TITI F TITLE STOCKTON, ALAN B. NAME NAME STREET ADDRESS STREET ADDRESS 11 KINGSMAN CIR CITY-ST-ZIP FORT MYERS, FL CITY-ST-7/P Delete T Change ☐ Addition TITLE TITLE WILMER CARTER NAME WELLS, LOVIE SR. NAME 3408 WILLARD STREET STREET ADDRESS 2931 LAFAYETTE ST. STREET ADDRESS FORT MYERS, FL. CITY-ST-ZIP FORT MYERS, FL CITY-ST-ZIP Delete ПΠЕ TX Change ☐ Addition TITLE RICHARD SIMPSON **NEAL, ADAMS** NAME NAME 346 MELODY CT. 3103 ST. CHARLES ST. STREET ADDRESS STREET ADDRESS FORT MYERS, FL 33916 CITY-ST-ZIP CITY-ST-7IP FORT MYERS, FL 33916 ☐ Delete TITLE ☐ Change Addition TITLE MAYO, GEORGE MAKE NAME STREET ADDRESS 3249 "C" T ST. STREET ADDRESS FORT MYERS, FL COY-ST-ZIP CITY-ST-ZIP WALLACE WASHINGTON **☆** Change ☐ Addition TITLE □ Delete TITLE HARRIS, SYLVESTER NAME NAME 30 SW 15th TERRACE STREET ADDRESS 3049 ST. CHARLES ST. STREET ADDRESS CAPE CORAL, FL. 33991 CTY-ST-ZP FORT MYERS, FL 33916 CITY-ST-7IP ■ Addition ☐ Delete TILE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 astrequired by Chapter 817, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like entrowered (1).

SIGNATURE: Rev.

3/19/06

FILED