

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001571

FILED
May 07, 2008
Secretary of State

Entity Name: MOUNT CARMEL FAITH DELIVERANCE CHURCH OF GOD (MISSISSAUGA) INC

Current Principal Place of Business:

7077 BRANIGAN GATE
MISSISSAUGA ONT L5N 7LS,

New Principal Place of Business:

4307 21ST SW
LEHIGH ACRES, FL 33976

Current Mailing Address:

7077 BRANIGAN GATE
MISSISSAUGA ONT L5N 7LS,

New Mailing Address:

4307 21ST SW
LEHIGH ACRES, FL 33976

FEI Number: 42-1727392 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SPENCE, GALBERT
4307 21ST SW
LEHIGH ACRES, FL 33971 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: C () Delete
Name: SPENCE, ALTHEA G
Address: 7077 BRANIGAN GATE
City-St-Zip: MISSISSAUGA ONT L5N 7LS,

Title: DT () Delete
Name: ELLIS, GEORGIA
Address: 7508 DISCUS CRES E
City-St-Zip: MISSISSAUGA ONT L5N 7LS,

Title: S () Delete
Name: BROWN, MICHOLETTE
Address: 101 GRAFFE AVE
City-St-Zip: BRAMPTON ONTARIO L6R 1Z2,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
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 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: ALTHEA GERALDINE SPENCE

C

05/07/2008

Electronic Signature of Signing Officer or Director

Date