

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000003771

FILED
Mar 19, 2009
Secretary of State

Entity Name: MISSION OF MT. OLIVES CHURCH OF GOD, INC.

Current Principal Place of Business:

24 CLEVELAND ST.
ORANGE, NJ 07050

New Principal Place of Business:

Current Mailing Address:

24 CLEVELAND ST.
ORANGE, NJ 07050

New Mailing Address:

FEI Number: 22-2321231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SMITH SOIRO, JEAN REV.
207 SOUTH SEQUOIA DR.
WEST PALM BEACH, FL 33407 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: TC () Delete
Name: REJOUIS, CHARLES REV
Address: 12 DEVONSHIRE TERRACE
City-St-Zip: WEST ORANGE, NJ 07052

Title: P () Delete
Name: ST VICTOR, TESTAR
Address: 84 ELLINGTON ST
City-St-Zip: EAST ORANGE, NJ 07017

Title: D () Delete
Name: LAURORE, JEAN O. REV
Address: 11110 NW 6TH AVE
City-St-Zip: MIAMI, FL 33168

Title: VP () Delete
Name: SMITH SOIRO, JEAN REV.
Address: 207 SOUTH SEQUOIA
City-St-Zip: WEST PALM BEACH, FL 33409

Title: S () Delete
Name: BONHEUR, JEAN L
Address: 257 INDIANA ST
City-St-Zip: UNION, NJ 07083

Title: D () Delete
Name: DUFRESNE, ELIE REV.
Address: 310 ROOSEVELT BLVD.
City-St-Zip: PHILADELPHIA, PA 19120

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:

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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: CHARLES REJOUIS

PRES

03/19/2009

Electronic Signature of Signing Officer or Director

Date