

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006815

FILED  
Apr 22, 2011  
Secretary of State

**Entity Name:** MT. TABOR AFRICAN METHODIST EPISCOPAL CHURCH OF OCALA, INC.

**Current Principal Place of Business:**

5410 NW 27TH AVE  
OCALA, FL 34475 US

**New Principal Place of Business:**

**Current Mailing Address:**

5410 NW 27TH AVE  
OCALA, FL 34475

**New Mailing Address:**

**FEI Number:** 59-1858861

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NELSON, T. PATRICIA  
4817 PINE AVENUE  
COLEMAN, FL 33521 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:** PD  
**Name:** NELSON, T PATRICIA REV  
**Address:** P O BOX 34  
**City-St-Zip:** COLEMAN, FL 33521 US

**Title:** SD  
**Name:** HUDSON, BILLIE  
**Address:** 6061 NW 54TH TERR  
**City-St-Zip:** OCALA, FL 34482 US

**Title:** TD  
**Name:** VEREEN, BRENDA  
**Address:** 7440 S.E. 22ND AVENUE  
**City-St-Zip:** OCALA, FL 34480 US

**Title:** D  
**Name:** JAMES, WILLIAM  
**Address:** 7576 NW HWY 441  
**City-St-Zip:** OCALA, FL 34475 US

**Title:** D  
**Name:** WILLIAMS, YVONNE  
**Address:** 5410 NW 27TH AVE  
**City-St-Zip:** OCALA, FL 34475 US

**Title:** ST  
**Name:** FIELDS, VELVET  
**Address:** 10 SPRING COURSE  
**City-St-Zip:** OCALA,, FL 34472 US

I hereby 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 all other like empowered.

**SIGNATURE:** T. PATRICIA NELSON, PASTOR

PAST

04/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date