


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2007 08:00 AM
Secretary of State

DOCUMENT # N01000002455
 1. Entity Name
MOUNT CARMEL BAPTIST CHURCH OF PERRY INC.



Principal Place of Business 2975 PISGAH RD. PERRY, FL 32347	Mailing Address 2975 PISGAH RD. PERRY, FL 32347
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01132007 No Chg-NP CR2E037 (4/06)

4. FEI Number 03-0408173	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
MCDONALD, DWIGHT
 2638 MCDANIEL RD.
 PERRY, FL 32347

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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 the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

000000589372
 01/18/07-20013-022 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUBBART, RANDY 3865 LONNIE WILSON RD PERRY, FL 32347
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOUCHTON, MAURICE RT. 5 BOX 550 PERRY, FL 32347
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCDONALD, DWIGHT 2638 MCDANIEL RD. PERRY, FL 32347
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 as required by Chapter 617, 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 empowered.

SIGNATURE: Dwight McDonald **1/13/07** **850-584-4977**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #