

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002700

FILED
Mar 24, 2010
Secretary of State

Entity Name: THE MOUNT OLIVE HOLINESS CHURCH, INC.

Current Principal Place of Business:

2000 OAKRIDGE ROAD
TALLAHASSEE, FL 32305

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 5871
TALLAHASSEE, FL 32310

New Mailing Address:

FEI Number: 03-0392917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEE, JAMES M
20 PAYNE ST
CRAWFORDVILLE, FL 32327 US

Name and Address of New Registered Agent:

LEE, JAMES M
1806 DOOMAR DRIVE
TALLAHASSEE, FL 32308 US

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:

03/24/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: LEE, JAMES M
Address: 20 PAYNE ST.
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D
Name: LEE, EDDIE J
Address: 20 PAYNE ST.
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D
Name: STOKES, WINNIFRED
Address: 215 FLEETWOOD ST., LOT #8
City-St-Zip: TALLAHASSEE, FL 32305

Title: P
Name: ALEXANDER, WESLEY PASTOR
Address: 2408 ALMOND DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: T
Name: ALEXANDER, DOROTHY
Address: 2346 LA RUE COURT
City-St-Zip: TALLAHASSEE, FL 32303

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: JAMES M. LEE

DEA.

03/24/2010

Electronic Signature of Signing Officer or Director

Date