

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001756

FILED
Apr 26, 2010
Secretary of State

Entity Name: MT. TRIAL COMMUNITY DEVELOPMENT CENTER, INC.

Current Principal Place of Business:

1418 SOPCHOPPY HWY
SOPCHOPPY, FL 32358 US

New Principal Place of Business:

Current Mailing Address:

43 GREENLIN VILLA RD
CRAWFORDVILLE, FL 32327 US

New Mailing Address:

FEI Number: 04-3619650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, RANDY
134 KATHY ANN DR
CRAWFORDVILLE, FL 32327 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: T
Name: HORDGES, SAMUEL
Address: 7 SLEEP EASY WAY
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: P
Name: NELSON, RANDY
Address: 134 KATHY ANN DR
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: VP
Name: PLUMMER, BERNARD
Address: 63 ANDREW HARGRETT RD
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: D
Name: PORTER, LEON
Address: 1193 SOPCHOPPY HWY
City-St-Zip: SOPCHOPPY, FL 32358 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: SAMUEL HORDGES

T

04/26/2010

Electronic Signature of Signing Officer or Director

Date