

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007888

FILED  
Jan 31, 2011  
Secretary of State

**Entity Name:** MOUNT CARMEL COMMUNITY RESOURCE CENTER, INC.

**Current Principal Place of Business:**

400 EAST OAK STREET  
PALATKA, FL 32177

**New Principal Place of Business:**

**Current Mailing Address:**

3624 WHITEHALL STREET  
PALATKA, FL 32177

**New Mailing Address:**

**FEI Number:** 73-1734383

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LONG, MOSES JR  
3624 WHITEHALL STREET  
PALATKA, FL 32177 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: P  
Name: ASHLEY, ROBERT  
Address: 231 WEST RIVER ROAD  
City-St-Zip: PALATKA, FL 32177 US

Title: V  
Name: HIRES, PHYLIS  
Address: 308 NORTH 8TH STREET  
City-St-Zip: PALATKA, FL 32177 US

Title: AS.S  
Name: LONG, DOMINIQUE C  
Address: 3624 WHITEHALL STREET  
City-St-Zip: PALATKA, FL 32177 US

Title: S  
Name: HOWELL, DOROTHY  
Address: 108 PALMETTO STREET  
City-St-Zip: PALATKA, FL 32177

Title: D  
Name: LONG, JUANITA  
Address: 3624 WHITEHALL STREET  
City-St-Zip: PALATKA, FL 32177

Title: T  
Name: BIDDLE, EBONIQUE S  
Address: 614 EMMETT STREET APT B.  
City-St-Zip: PALATKA, FL 32177

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: JUANITA LONG

PD

01/31/2011

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

\_\_\_\_\_  
Date