

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012340

FILED
Apr 30, 2006
Secretary of State

Entity Name: MOUNT OLIVE COMMUNITY DEVELOPMENT CORPORATION

Current Principal Place of Business:

600 JONES ST
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

600 JONES ST
CLEARWATER, FL 33755

New Mailing Address:

P.O. BOX 404
CLEARWATER, FL 33757

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAMS, RONALD E SR
600 JONES ST
CLEARWATER, FL 33755 US

Name and Address of New Registered Agent:

JAMES, BETTY
P.O. BOX 404
CLEARWATER, FL 33757 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: BETTY JAMES

04/30/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WILLIAMS, RONALD E SR
Address: 600 JONES ST
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: JAMES, BETTY
Address: 600 JONES ST
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: DUVAL, TERRI
Address: 600 JONES ST
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: REMBERT, JAMES C
Address: 600 JONES ST
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: GAITER, SONJA
Address: 600 JONES ST
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: GODWIN, SABRINA
Address: 600 JONES ST
City-St-Zip: CLEARWATER, FL 33755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JAMMES, BETTY
Address: 600 JONES ST
City-St-Zip: CLEARWATER, FL 33755

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BETTY JAMES

PRES

04/30/2006

Electronic Signature of Signing Officer or Director

Date