

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009584

FILED  
Mar 01, 2010  
Secretary of State

Entity Name: MAYO MANNA HOUSE, INC.

**Current Principal Place of Business:**

297 SE PINE STREET  
MAYO, FL 32066

**New Principal Place of Business:**

2849 E US 27  
MAYO, FL 32066

**Current Mailing Address:**

2849E US 27  
MAYO, FL 32066

**New Mailing Address:**

2849 E US 27  
MAYO, FL 32066

FEI Number: 51-0651212

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

IMLER, DONALD A  
2849 EAST US 27  
MAYO, FL 32066 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: PRES  
Name: IMLER, DONALD A  
Address: 2849 EAST US 27  
City-St-Zip: MAYO, FL 32066

Title: DV  
Name: HENDERSON, J. RICHARD  
Address: 214 NE RIVER BANK RD  
City-St-Zip: MAYO, FL 32066

Title: S  
Name: IMLER, PATRICIA  
Address: 2849 EAST US 27  
City-St-Zip: MAYO, FL 32066

Title: DT  
Name: JOHNSON, VIOLET (VI)  
Address: PO BOX 696  
City-St-Zip: MAYO, FL 32066

Title: D  
Name: DILLON, FORREST M  
Address: 298 SW GRACELAND ROAD  
City-St-Zip: MAYO, FL 32066

Title: D  
Name: DAVID, FOUNTAIN 3  
Address: 328 GRACELAND RD  
City-St-Zip: MAYO, FL 32066

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: DONALD A. IMLER

P

03/01/2010

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

\_\_\_\_\_  
Date