2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07438

FILED Feb 01, 2009 Secretary of State

Entity Name: MOUNT MORIAH AFRICAN METHODIST EPISCOPAL CHURCH OF WILDWOOD, INC.

Current Principal Place of Business: New Principal Place of Business:

2710 C.R 44 A 2710 HWY, 44 A

WILDWOOD, FL 34785 WILDWOOD, FL 34785

Current Mailing Address: New Mailing Address:

P.O. BOX 541

WILDWOOD, FL 34785

FEI Number: 53-0204696 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SIMMONS, JEAN R LARRIS, VERNIA L STEWARD 909 HUEY STREET 205 S. ST. CLAIR STREET

WILDWOOD, FL 34785 US WILDWOOD, FL 34785

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: VERNIA L. LARRIS 02/01/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete COLSTON, ANNETTE PASTOR COLSTON, ANNETTE PASTOR Name: Name: 1205 HUEY STREET Address: 1205 HUEY STREET Address:

City-St-Zip: WILDWOOD, FL 34785 City-St-Zip: WILDWOOD, FL 34785 US

Title: Title: (X) Change () Addition () Delete JACOBS, CHARLIE Name: JACOBS, CHARLIE Name:

Address: 2518 C.R. 222 Address: 2518 C.R. 222 City-St-Zip: WILDWOOD, FL 34785 City-St-Zip: WILDWOOD, FL 34785 US

Title: () Delete Title: (X) Change () Addition HAUGABROOKE, GLORIA HAUGABROOK, GLORIA J Name: Name:

Address: 211 PITT ST Address: 211 PITT ST

City-St-Zip: WILDWOOD, FL 34785 City-St-Zip: WILDWOOD, FL 34785 US

Title: () Delete Title: (X) Change () Addition

Name: JOHNSON, LEO Name: JACOBS, AUBREY D Address: 4759 CR 134 Address: 707 MOSS STREET City-St-Zip: WILDWOOD, FL 34785 City-St-Zip: WILDWOOD, FL 34785 US

Title: () Delete Title: (X) Change () Addition

RIVERS, ARTHUR RIVERS, ARTHUR Name: Name: 8271 CR 127 8271 CR 127 Address: Address:

WILDWOOD, FL 34785 City-St-Zip: City-St-Zip: WILDWOOD, FL 34785 US

I hereby certify that the information supplied with this filing does not qualify 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: AUBREY D. JACOBS SECT 02/01/2009