

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001655

FILED  
Mar 30, 2010  
Secretary of State

**Entity Name:** MOUNT PELIER BAPTIST CHURCH, INCORPORATED

**Current Principal Place of Business:**

13175 HIGHWAY 301 NORTH  
SUMMERFIELD, FL 34491 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1281  
SUMMERFIELD, FL 34491 US

**New Mailing Address:**

PO BOX 494  
BELLEVIEW, FL 34420 US

FEI Number: 26-2063040

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GANT, JEROME  
13175 HIGHWAY 301 NORTH  
SUMMERFIELD, FL 34491 US

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

SUMMERS, DANIEL T  
13175 HIGHWAY 301 NORTH  
SUMMERFIELD, FL 34491 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: DANIEL T SUMMERS

03/30/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SCOTT, LEONARD  
Address: P.O. BOX 304  
City-St-Zip: WEIRSDALE, FL 32195 US

Title: D  
Name: CRAWFORD, JOHN P  
Address: P O BOX 1201  
City-St-Zip: BELLEVIEW, FL 34420 US

Title: D  
Name: SUMMERS, GENEVA  
Address: 3365 SE 115TH STREET  
City-St-Zip: BELLEVIEW, FL 34491 US

Title: T  
Name: MOBLEY, MARY  
Address: P O BOX 494  
City-St-Zip: BELLEVIEW, FL 34420 US

Title: AT  
Name: PINER, ELOISE  
Address: 5790 138TH ST  
City-St-Zip: SUMMERFIELD, FL 34491 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: LEONARD SCOTT

P

03/30/2010

Electronic Signature of Signing Officer or Director

Date