

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000010582

**FILED**  
**May 18, 2011**  
**Secretary of State**

**Entity Name:** MOUNT MORIAH CHARTERS OF FLORIDA, INC.

**Current Principal Place of Business:**

4901 WOODVILLE HWY.  
TALLAHASSEE, FL 32305

**New Principal Place of Business:**

200-D JOHN KNOX ROAD  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

4901 WOODVILLE HWY.  
TALLAHASSEE, FL 32305

**New Mailing Address:**

200-D JOHN KNOX ROAD  
TALLAHASSEE, FL 32303

**FEI Number:** 26-3884170

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILSON, MARIE C ATTY.  
2383 TAMiami TRAIL SOUTH, SUITE A  
VENICE, FL 34293 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:** PSTD  
**Name:** MILLER, RENEE  
**Address:** 55 BALL CT.  
**City-St-Zip:** CRAWFORDVILLE, FL 32327

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:** SONYA RENEE MILLER

MRS

05/18/2011

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

\_\_\_\_\_  
Date