

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08788

FILED  
Apr 05, 2006  
Secretary of State

Entity Name: MOUNTAIN TOP INTERNATIONAL FELLOWSHIP OF CHURCHES, INC.

**Current Principal Place of Business:**

6124 WEATHERWOOD CIRCLE  
WESLEY CHAPEL, FL 33544

**New Principal Place of Business:**

7411 EAST COMANCHE AVE  
TAMPA, FL 33610

**Current Mailing Address:**

PO BOX 11308  
TAMPA, FL 33680

**New Mailing Address:**

FEI Number: 59-2520497      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

JONES, DAVID A DR.  
6124 WEATHERWOOD CR  
TAMPA, FL 33544      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: PCD      ( ) Delete  
Name: JONES, DAVID A  
Address: 6124 WEATHERWOOD CIRCLE  
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: SD      ( ) Delete  
Name: MCAFEE, SHIRLEY A  
Address: P O BOX 11308  
City-St-Zip: TAMPA, FL 33680

Title: VD      ( ) Delete  
Name: FRAZIER, NELIA  
Address: 7889 NIAGRA  
City-St-Zip: TAMPA, FL 33617

Title: VPD      ( ) Delete  
Name: JONES, BEVELYN A  
Address: P.O. BOX 11308  
City-St-Zip: TAMPA, FL 33680

Title: D      ( ) Delete  
Name: JACKSON, JENNIFER  
Address: 2428 HANVANA DR  
City-St-Zip: CLEARWATER, FL 33764

Title: D      ( ) Delete  
Name: BUNTING, EDDY T  
Address: 706 SUNBRIGHT DR  
City-St-Zip: SEFFNER, FL 33584

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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:

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: EDDY T BUNTING

D

04/05/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date