## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08788

FILED May 07, 2007 Secretary of State

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

	rincipal Place of Business:	New Principal Place of Business:
7411 EAS TAMPA, F	T COMANCHE AVE L 33610	
Current M	lailing Address:	New Mailing Address:
PO BOX 1 AMPA, F		
n accordan	: 59-2520497 FEI Number Applied For ( ice with s. 607.193(2)(b), F.S., the corporation	did not receive the prior notice.
lame and	I Address of Current Registered Ager	nt: Name and Address of New Registered Agent:
	AVID A DR. ATHERWOOD CR L 33544 US	
	named entity submits this statement for e of Florida.	the purpose of changing its registered office or registered agent, or both
SIGNATU	RE:	
	Electronic Signature of Registere	d Agent Date
FFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
itle: lame: .ddress: city-St-Zip:	PCD () Delete JONES, DAVID A 6124 WEATHERWOOD CIRCLE WESLEY CHAPEL, FL 33544	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
	SD () Delete	Title: ( ) Change ( ) Addition
lame: .ddress:	MCAFEE, SHIRLEY A P O BOX 11308 TAMPA, FL 33680	Name: Address: City-St-Zip:
lame: ddress: city-St-Zip: itle: lame: ddress:	MCAFEE, SHIRLEY A P O BOX 11308	Name: Address:
itle: lame: lddress: city-St-Zip: litle: lame: lddress: city-St-Zip: litle: lame: lame: lddress: city-St-Zip:	MCAFEE, SHIRLEY A P O BOX 11308 TAMPA, FL 33680  VD ( ) Delete FRAZIER, NELIA 7889 NIAGRA	Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address:
lame: .ddress: city-St-Zip: ittle: lame: .ddress: city-St-Zip: ittle: lame: .ddress:	MCAFEE, SHIRLEY A P O BOX 11308 TAMPA, FL 33680  VD ( ) Delete FRAZIER, NELIA 7889 NIAGRA TAMPA, FL 33617  VPD ( ) Delete JONES, BEVELYN A P.O. BOX 11308	Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address:

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 05/07/2007