

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08788

FILED
Apr 01, 2008
Secretary of State

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

Current Principal Place of Business:

7411 EAST COMANCHE AVE
TAMPA, FL 33610

New Principal Place of Business:

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 (X) 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
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City-St-Zip:

Title: () Change () Addition
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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 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

04/01/2008

Electronic Signature of Signing Officer or Director

Date