

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010807

FILED
Apr 26, 2010
Secretary of State

Entity Name: MOUNT OLIVE AFRICAN METHODIST EPISCOPAL CHURCH, PLANT CITY, FL INCORPORATED

Current Principal Place of Business:

1115 WEST MADISON STREET
PLANT CITY, FL 33564

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 786
PLANT CITY, FL 33564

New Mailing Address:

FEI Number: 94-3489926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

YOUNG, MCKINLEY
101 EAST UNION STREET
SUITE # 301
JACKSONVILLE, FL 32202 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: T
Name: FOSTER, HENRY L
Address: 1003 MAGWIRE STREET
City-St-Zip: PLANT CITY, FL 33564

Title: O
Name: MILLER, ROOSEVELT
Address: 705 W. BALL STREET #8
City-St-Zip: PLANT CITY, FL 33563

Title: S
Name: BURNETT, DELPHINE
Address: 2010 W WILLOW DRIVE
City-St-Zip: PLANT CITY, FL 33564

Title: V
Name: RICE, BOBBI
Address: 8718 N. LARKHALL PLACE
City-St-Zip: TAMPA,, FL 33604

Title: P
Name: MOSLEY, PATRICIA A
Address: 1115 WEST MADISON STREET
City-St-Zip: PLANT CITY, FL 33564

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: PATRICIA A. MOSLEY

P

04/26/2010

Electronic Signature of Signing Officer or Director

Date