

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14865

FILED
Feb 29, 2008
Secretary of State

Entity Name: MOUNT CHARITY MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

1417 LAURA ST.
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

1417 LAURA ST.
JACKSONVILLE, FL 32206

New Mailing Address:

FEI Number: 59-2685189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARVEY, GEORGE JR
10668 PINHOLSTER ROAD
JACKSONVILLE, FL 32218 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: PTD () Delete
Name: HARVEY, GEORGE JR
Address: 10668 PINHOLSTER RD.
City-St-Zip: JACKSONVILLE, FL 32218

Title: DS () Delete
Name: HARVEY, JOANNE T
Address: 10668 PINHOLSTER RD
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: HOLLIDAY, CHARLSTINE
Address: 4662 ROANOKE BLVD.
City-St-Zip: JACKSONVILLE, FL 32208

Title: D (X) Delete
Name: HARVEY, ANNIE C
Address: 3026 DONNA DR
City-St-Zip: JACKSONVILLE, FL 32208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HARVEY, ANNIE C
Address: 3026 DONNA DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

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: GEORGE HARVEY, JR.

PDT

02/29/2008

Electronic Signature of Signing Officer or Director

Date