2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15182

FILED Apr 10, 2012 Secretary of State

Entity Name: MOUNT OLIVE MISSIONARY BAPTIST CHURCH OF FORT PIERCE, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

800 AVENUE C

FORT PIERCE, FL 349504129

Current Mailing Address: New Mailing Address:

P.O. BOX 3863

FORT PIERCE, FL 34948

FEI Number: 59-2290194 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

EDWARDS, JAMES A 1900 VALENCIA AVE

FT. PIERCE, FL 34946 US

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: CD

Name: EDWARDS, JAMES A Address: 1900 VALENCIA AVE. City-St-Zip: FT. PIERCE, FL

Title:

Name: MCCARTHY, TOMMY Address: 800 AVE C.

City-St-Zip: FT. PIERCE, FL 34950

Title: REV

Name: COLEMAN, HOWARD

Address: 800 AVE. C

City-St-Zip: FT. PIERCE, FL 34950

Title:

Name: BARNES, TONY Address: 800 AVE C

City-St-Zip: FT. PIERCE, FL 34950 US

Title:

Name: BUTLER, CHARLES Address: 800 AVE. C.

City-St-Zip: FT. PIERCE, FL 34950

Title: [

Name: WILLIAMS, LORENZO

Address: 800 AVE C

City-St-Zip: FT. PIERCE, FL 34950

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: JAMES A. EDWARDS DEA 04/10/2012

Entity Name: MOUNT OLIVE MISSIONARY BAPTIST CHURCH OF FORT PIERCE, FLORIDA, INC. distractions. New Principal Place of Business: **Current Principal Place of Business:** 800 AVENUE C FORT PIERCE, FL 349504129 **Current Mailing Address: New Mailing Address:** P.O. BOX 3863 FORT PIERCE, FL 34948 Certificate of Status Desired () FEI Number: 59-2290194 FEI Number Applied For () FEI Number Not Applicable () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: EDWARDS, JAMES A 1900 VALENCIA AVE FT. PIERCE, FL 34946 US 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. Electronic Signature of Registered Agent **OFFICERS AND DIRECTORS:** BENTON, MARGARET P.O. BOX 3863 Title: CD EDWARDS, JAMES A Name: Address: 1900 VALENCIA AVE. City-St-Zip: FT. PIERCE, FL ET Pierce, FL 34948 Title: MCCARTHY, TOMMY Name: Address: 800 AVE C. FT. PIERCE, FL 34950 City-St-Zip: Title: COLEMAN, HOWARD Name: Address: 800 AVE. C FT. PIERCE, FL 34950 City-St-Zip: Title: Name: BARNES, TONY Address: 800 AVE C City-St-Zip: FT, PIERCE, FL 34950 US Title: BUTLER, CHARLES Name: Address: 800 AVE. C. FT. PIERCE, FL 34950 City-St-Zip: Title: Name: WILLIAMS, LORENZO 800 AVE C Address: FT. PIERCE, FL 34950 City-St-Zio:

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.

NSON

D