2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# N25372

Entity Name: MT. OLIVE FIRST MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

1140 NW 30 AVE
FT. LAUDERDALE, FL 33311 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 100636
FORT LAUDERDALE, FL 33310 US

New Mailing Address:

FEI Number: 65-0055907 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HYPPOLITE, FRANCINOR
1140 NW 30 AVE
FORT LAUDERDALE, FL 33311 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: PD ( ) Delete
Name: HYPPOLITE, FRANCINOR,
Address: 1140 NW 30 AVE
City-St-Zip: FT. LAUDERDALE, FL

Title: VD ( ) Delete
Name: HYPPOLITE, ETILUS
Address: 1140 NW 30 AVE
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: TD ( ) Delete
Name: EGLAUS, MAUDE T
Address: 1140 NW 30 AVE
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: SD ( ) Delete
Name: LORIMAIRE, PAUL
Address: 1140 NW 30 AVE
City-St-Zip: FT. LAUDERDALE, FL

Title: ASD ( ) Delete
Name: HYPPOLITE, MARIE O.,
Address: 1140 NW 30 AVE
City-St-Zip: FT. LAUDERDALE, FL

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
Name:
Address:
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 for the exemption stated in Section 119.07(3)(i), 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: FRANCINOR HYPPOLITE P/D 04/28/2005

Electronic Signature of Signing Officer or Director — Date