# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N40931

FILED Apr 06, 2006 Secretary of State

Entity Name: MT. CARMEL COMMUNITY CHURCH OF JACKSON COUNTY, INC.

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

3394 GARDENVIEW ROAD MARIANNA, FL 32446

**Current Mailing Address: New Mailing Address:** 

PO BOX 6401 3343 FIVE POINTS ROAD MARIANNA, FL 324476401 US COTTONDALE, FL 32431 US

FEI Number: 59-0344570 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:

TANNER, ROBERT, JR. 2341 TOPAZ ROAD COTTONDALE, FL 32431 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:

Name:

Address:

Date

### Electronic Signature of Registered Agent

() Delete

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

#### **OFFICERS AND DIRECTORS:**

(X) Change ( ) Addition

TANNER, ROBERT J TANNER, ROBERT J Name: 2341 TOPAZ ROAD Address: 2341 TOPAZ ROAD

City-St-Zip: COTTONDALE, FL City-St-Zip: COTTONDALE, FL 32431 US

Title: ( ) Delete Title: D (X) Change ( ) Addition

SIPLES, DONALD Name: SIPLES, DONALD Name: Address: 2335 TOPAZ ROAD Address: 2335 TOPAZ ROAD City-St-Zip: COTTONDALE, FL 32431 City-St-Zip: COTTONDALE, FL 32431 US

Title: () Delete Title: (X) Change ( ) Addition

SPEIGHTS, CHARLES SPEIGHTS, CHARLES Name: Name: Address: SPEIGHTS LN Address: SPEIGHTS LN

City-St-Zip: MARIANNA, FL City-St-Zip: MARIANNA, FL 32446 US

Title: ( ) Delete Title: (X) Change ( ) Addition

Name: MAYBON, WILLIE F Name: MAYBON, WILLIE F Address: 3343 FIVE POINT ROAD Address: 3343 FIVE POINT ROAD COTTONDALE, FL City-St-Zip: City-St-Zip: COTTONDALE, FL 32431 US

I hereby certify that the information supplied with this filing does not qualify for the 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: BETTY J. MAYBON SEC 04/06/2006