

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2006 8:00 am
Secretary of State

05-03-2006 90196 032 *****70.00

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1. Entity Name

**MOUNT OLIVE MISSIONARY BAPTIST CHURCH OF
CRYSTAL RIVER, INCORPORATED**



Principal Place of Business

Mailing Address

2105 N GEORGIA RD
CRYSTAL RIVER FL 34429

PO BOX 327
CRYSTAL RIVER FL 34423



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-6568848

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BIDDLE, LILLIE M
926 NORTHEAST 3RD STREET
CRYSTAL RIVER FL 34429**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME ALLEN, JUDGE
STREET ADDRESS 3801 E. ARBOR LAKE DRIVE
CITY-ST-ZIP HERNANDO FL 34442

TITLE ☒ Change ☐ Addition
NAME Hill, Leroy
STREET ADDRESS 3 Carnation Court
CITY-ST-ZIP Homosassa, FL 34448

TITLE ☐ Delete
NAME FOSTER, GEORGE
STREET ADDRESS 672 NORTH EAST 8TH AVENUE
CITY-ST-ZIP CRYSTAL RIVER FL 34428

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME BIDDLE, LILLIE M
STREET ADDRESS 926 NORTH EAST 3RD STREET
CITY-ST-ZIP CRYSTAL RIVER FL 34429

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME COUNCIL, ALFONSO
STREET ADDRESS 745 NE 5TH TERRACE
CITY-ST-ZIP CRYSTAL RIVER FL 34428

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME WHALEY, WILLARD
STREET ADDRESS 2537 NORTH VIRGINIA ROAD
CITY-ST-ZIP CRYSTAL RIVER FL 34428

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME NELSON, WILLIE
STREET ADDRESS 1154 NE 1ST ST
CITY-ST-ZIP CRYSTAL RIVER FL 34429

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lillie M. Biddle*

Lillie M. Biddle

04/12/2006 352-563-6329