


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 13, 2005 8:00 am
Secretary of State

04-18-2005 90293 009 ****61.25

DOCUMENT # N94000005389

1. Entity Name
MOUNT OLIVE DEVELOPMENT CORPORATION



Principal Place of Business
**401 NW 9TH AVENUE
 FT. LAUDERDALE, FL 33311 US**

Mailing Address
**401 NW 9TH AVENUE
 FT. LAUDERDALE, FL 33311 US**

66016839



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

03312005 Chg-NP CR2E037 (10/03)

City & State
 Zip Country

4. FEI Number
65-0548855

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**TAYLOR, NORMAN E
 401 NW 9TH AVENUE
 FT. LAUDERDALE, FL 33311**

7. Name and Address of New Registered Agent
 Name **Fields, Henry**
 Street Address (P.O. Box Number is Not Acceptable)
401 NW 9th Avenue
 City **Fort Lauderdale FL** Zip Code **FL 33311**

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 **Henry Fields** **Henry Fields** **5/9/05**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$81.25
Due by May 1, 2005

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 NAME STREET ADDRESS CITY-ST-ZIP	MGRM OSGOOD, ROSALIND 1819 N.W. 3RD COURT FT. LAUDERDALE, FL 33311	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, SAMUEL 12676 NW 67TH DRIVE FT. LAUDERDALE, FL 33311	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, ROLANE 401 NW 9TH AVENUE FT. LAUDERDALE, FL 33311	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC FIELDS, HENRY 401 NW 9TH AVENUE FT. LAUDERDALE, FL 33311	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MONROE, JAMES W 12600 N.W. 65TH DR. PARKLAND, FL 33076	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WEST, CHARLES 720 CYPRESS PEMBROKE PINES, FL 33027	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OSGOOD Rosalind, Dr. 1819 NW 3rd Court Fort Lauderdale, FL 33311	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC Williams, Samuel 12676 NW 67th Drive Fort Lauderdale, FL 33311	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Brown, Rolane 401 NW 9th Avenue Fort Lauderdale, FL 33311	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman Fields, Henry 401 NW 9th Avenue Fort Lauderdale, FL 33311	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Monroe, James 12600 NW 65th Drive Parkland, FL 33076	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Houston, Carolyn 401 NW 9th Ave Fort Lauderdale, FL 33311	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: **Rosalind Osgood - CEO** **3/29/05** **954 261-4318**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #