

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000615

FILED  
Feb 20, 2012  
Secretary of State

**Entity Name:** MT. OLIVE MISSIONARY BAPTIST CHURCH OF LAKE HARBOR, FLORIDA, INC.

**Current Principal Place of Business:**

617 S.W. AVENUE C  
BELLE GLADE, FL 33430 US

**New Principal Place of Business:**

225 NW AVENUE G  
BELLE GLADE, FL 33430 US

**Current Mailing Address:**

PO BOX 245  
LAKE HARBOR, FL 33459 US

**New Mailing Address:**

**FEI Number:** 65-0633145      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

HOLMAN, JOHN H REV  
617 S.W. AVENUE C  
BELLE GLADE, FL 33430 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  
Name: HOLMAN, JOHN H  
Address: 617 S.W. AVENUE C  
City-St-Zip: BELLE GLADE, FL 33430 US

Title: VD  
Name: THORNTON, MAJOR  
Address: 1215 LOUISIANA AVE.  
City-St-Zip: CLEWISTON, FL 33440

Title: SD  
Name: SMALL, FREDERICK  
Address: 1037 MISSISSIPPI AVENUE  
City-St-Zip: CLEWISTON, FL 33440

Title: SD  
Name: FORD, MARY  
Address: 300 SW 1ST STREET  
City-St-Zip: SOUTH BAY, FL 33493

Title: TD  
Name: MOORE, ANNETTE  
Address: 501B PREWITT VILLAGE  
City-St-Zip: BELLE GLADE, FL 33430

Title: SD  
Name: FORD, JOHN A  
Address: 126 WAKULA SPRING WAY  
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: JOHN HOLMAN

PD

02/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date