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May 27 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N97000001760 (4) NC 3/30/98
1. Corporation Name
MOUNT CARMEL COMMUNITY DEVELOPMENT CORPORATION
OF CLEARWATER INC.

Principal Place of Business
1014 PENNSYLVANIA AVE
CLEARWATER FL 34615

Mailing Address
1014 PENNSYLVANIA AVE
CLEARWATER FL 34615

3. Date Incorporated or Qualified
03/26/1997

4. FEI Number
59-3452129
Applied For
Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.
SAME

22 City & State
SAME

23 Zip
33755

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.
SAME

27 City & State
SAME

28 Zip
33755

29 Country

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

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

KELLEY, WILLIE O
1201 WEBB DRIVE
CLEARWATER FL 34615

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 800002538198
84 City 05/28/98 01013-046
***61.25 FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
	PROSB			<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
PRES/TRANS	MAURICE E. MICKENS	5114 POSTELL DRIVE	1701 DAY FL. 34690	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SEC	JAMES PIGRAC	2906 TORREY PINUS COURT	CLEARWATER, FL 34621	<input type="checkbox"/>	<input checked="" type="checkbox"/>
MD	WILLIAM F. SHERMAN	1249 GLDRIDGE ST	CLEARWATER FL 34615	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	WILLIAM M. HARRIS	750 LAKE FOREST DRIVE	CLEARWATER FL 34615	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	CHARLIE BRINSON	1368 S. WASHINGTON ST.	CLEARWATER FL 34616	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	JOHN DEAN	2185 LAWRENCE DR	CLEARWATER FL 34624	<input type="checkbox"/>	<input checked="" type="checkbox"/>

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: _____ 813-993-1168