

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 06, 2006
Secretary of State**

DOCUMENT# N99000001103

Entity Name: MOUNT MORIAH MISSIONARY BAPTIST CHURCH OF WINTER PARK, INC.

Current Principal Place of Business:

421 S PENNSYLVANIA AVE
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

P O BOX 2044
WINTER PARK, FL 327902044

New Mailing Address:

FEI Number: 59-3685420 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PORTER, ROBERT L
450 MORNING BLOSSOM LANE
OVIEDO, FL 32765 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 () Delete
Name: COBB, A C REV
Address: 502 COMSTOCK AVE
City-St-Zip: WINTER PARK, FL

Title: VD () Delete
Name: BRYANT, BIRKE
Address: 6130 TIEBBETTS DR
City-St-Zip: ORLANDO, FL

Title: SD () Delete
Name: PORTER, ROBERT
Address: 450 MORNING BLOSSOM LANE
City-St-Zip: OVIEDO, FL

Title: TD () Delete
Name: CRANFORD, CHARLIE
Address: 8323 ESPERANZA
City-St-Zip: ORLANDO, FL

Title: D () Delete
Name: ALLISON, DAVID
Address: 140 LAKEWIND TRAIL
City-St-Zip: MAITLAND, FL

Title: D () Delete
Name: MCCAIN, KENNETH
Address: 4 CARVER CT
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: POOLE, REV. WILLIE CH
Address: 4908 CENTER LANE
City-St-Zip: ORLANDO, FL 32808

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: ROBERT L PORTER

SD

05/06/2006

Electronic Signature of Signing Officer or Director

Date