

2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N99000002917

FILED
Dec 09, 2011
Secretary of State

Entity Name: MT. CALVARY MISSIONARY BAPTIST CHURCH OF OCALA, INC.

Current Principal Place of Business:

5000 SW COLLEGE RD.
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

5000 SW COLLEGE RD.
OCALA, FL 34474

New Mailing Address:

FEI Number: 35-3690190

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEAHMON, PAULA
5000 SW COLLEGE RD.
OCALA, FL 34474 US

Name and Address of New Registered Agent:

LEAHMON, RICHARD
5400 S.W. 50TH CT.
OCALA, FL 34474 US

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: RICHARD LEAHMON

12/09/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CT
Name: LEAHMON, RICHARD
Address: 5400 S.W. 50TH CT.
City-St-Zip: OCALA, FL 34474

Title: T
Name: GRAY, LAGUSTA
Address: 1790 S.W. 80TH AVE.
City-St-Zip: OCALA, FL 34482

Title: S
Name: WILLIAMS, PAULA
Address: 1714 S.W. 3RD STREET
City-St-Zip: OCALA, FL 34474

Title: TR
Name: NELSON, ROSA
Address: P.O. BOX 6087
City-St-Zip: OCALA, FL 34478

Title: CD
Name: COLE, WILBERT
Address: 165 NE 43RD AVE.
City-St-Zip: OCALA, FL 34472

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: RICHARD LEAHMON

CT

12/09/2011

Electronic Signature of Signing Officer or Director

Date