

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 712566

**Entity Name:** MOUNTAIN TOP INTERNATIONAL MINISTRIES, INC.**Current Principal Place of Business:**8008 E. CHELSEA STREET  
TAMPA, FL 33610**Current Mailing Address:**P.O. BOX 11308  
TAMPA, FL 33680 US**FEI Number:** 59-2506977**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**JONES, DAVID A  
6124 WEATHERWOOD CIRCLE  
WESLEY CHAPEL, FL 33545 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	PCD
Name	JONES, DAVID ABISHOP
Address	6124 WEATHERWOOD CIRCLE
City-State-Zip:	WESLEY CHAPEL FL 33545

Title	ES
Name	MCAFEE, SHIRLEY A
Address	812 FRANKFORD DR
City-State-Zip:	BRANDON FL 33511

Title	D
Name	PARKER, CASSANDRA
Address	4411 TUNA DR
City-State-Zip:	TEMPLE TERRACE FL 33617

Title	VPD
Name	JONES, BEVELYN
Address	P O BOX 11308
City-State-Zip:	TAMPA FL 33680

Title	D
Name	MCAFEE, ALBERT
Address	812 FRANKFORD DR
City-State-Zip:	BRANDON FL 33511

*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:** CASSANDRA M PARKER**DIRECTOR****04/18/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date