

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712906

Entity Name: MOUNT NEBO MISSIONARY BAPTIST CHURCH, INC.**Current Principal Place of Business:**

MOUNT NEBO MISSIONARY BAPTIST CHURCH, INC.
2251 NW 22ND STREET
FT. LAUDERDALE, FL 33311

Current Mailing Address:

P O BOX 122256
FORT LAUDERDALE, FL 33312 US

FEI Number: 65-0491866**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**

WASHINGTON, OTIS SR.
680 NW 33 AVE
FT. LAUDERDALE, FL 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: OTIS WASHINGTON SR.

06/10/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PASTOR
Name MCKENZIE, DANNY L SR.
Address MOUNT NEBO MISSIONARY BAPTIST
CHURCH, INC
2251 NW 22ND STREET
City-State-Zip: FT. LAUDERDALE FL 33311

Title CO-CHAIRMAN - TRUSTEE BOARD
Name MORGAN, SAMUEL
Address MOUNT NEBO MISSIONARY BAPTIST
CHURCH, INC
2251 NW 22ND STREET
City-State-Zip: FORT LAUDERDALE FL

Title TREASURER
Name CHEEKS, ROSETTA
Address MOUNT NEBO MISSIONARY BAPTIST
CHURCH, INC
2251 NW 22ND STREET
City-State-Zip: FT. LAUDERDALE FL 33311

Title CHAIRPERSON TRUSTEE BOARD
Name THOMPSON, CHRISTINE
Address MOUNT NEBO MISSIONARY BAPTIST
CHURCH, INC
2251 NW 22ND STREET
City-State-Zip: FT. LAUDERDALE FL 33311

Title CHAIRMAN - DEACON BOARD
Name WASHINGTON, OTIS SR.
Address 680 NW 33RD AVE
City-State-Zip: FORT LAUDERDALE FL

Title DEACON
Name JONES, PAUL JR
Address MOUNT NEBO MISSIONARY BAPTIST
CHURCH, INC
2251 NW 22ND STREET
City-State-Zip: FT. LAUDERDALE FL 33311

Title ASST. FINANCIAL SECRETARY
Name THOMPSON, JOANN
Address MOUNT NEBO MISSIONARY BAPTIST
CHURCH, INC
2251 NW 22ND STREET
City-State-Zip: FORT LAUDERDALE FL 33311

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: ROSETTA CHEEKS

TREASURER

06/10/2020

Electronic Signature of Signing Officer/Director Detail

Date