

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719349

Entity Name: MT. CARMEL METHODIST CHURCH OF FLORAL CITY, INC.

Current Principal Place of Business:

8004 S. FL AVENUE
FLORAL CITY, FL 34436

Current Mailing Address:

POST OFFICE BOX 286
FLORAL CITY, FL 34436

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LANGLEY, ALIDA V
7950 S. CHORON TERRACE
BOX 286
FLORAL CITY, FL 34436 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 P
Name DUNHAM-LANGLEY, FLORENCE E
Address 7975 S BEDFORD RD
City-State-Zip: FLORAL CITY FL 34436

Title T
Name HILLS, SARA
Address 810 N CHARLES AVE
City-State-Zip: INVERNESS FL 34453

Title T
Name JACKSON, RAFAEL
Address 1143 S CORNELL TERRACE
City-State-Zip: INVERNESS FL 34452

Title T
Name ANDERSON, EARL
Address POST OFFICE BOX 363
City-State-Zip: FLORAL CITY FL 34436

Title TRUSTEE
Name LANGLEY, ALIDA V
Address 7950 S CHORON TERRACE
City-State-Zip: FLORAL CITY FL 34436

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: ALIDA LANGLEY

TRUSTEE

04/28/2017

Electronic Signature of Signing Officer/Director Detail

Date