

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741524

FILED
Jan 31, 2014
Secretary of State
CC2665901901

Entity Name: MISSIONARY EVANGELIST OUTREACH CENTER HOLINESS CHURCH, INC.

Current Principal Place of Business:

1766 N.W. 95 STREET
MIAMI, FL 33147

Current Mailing Address:

C/O LA FARIES MORTIMER
3230 N.W. 151ST TERRACE
OPA LOCKA, FL 33054

FEI Number: 65-0028303

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MORTIMER, LA FARIES Y
3230 N.W. 151ST TERRACE
OPA LOCKA, FL 33054 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 CEO
Name KEMP, JOHNNY L
Address 3950 N.W. 177TH STREET
City-State-Zip: CAROL CITY FL 33055

Title VP
Name KEMP, PATTY L
Address 3950 NW 177TH ST
City-State-Zip: CAROL CITY FL 33055

Title D
Name MUMFORD, TADERRYL
Address 1800 NW 85TH STREET
City-State-Zip: MIAMI FL 33147

Title SD
Name MORTIMER, CHRISTINE
Address 4230 NW 173 DR
City-State-Zip: CAROL CITY FL 33055

Title DIRECTOR
Name KOON-KOON, CREZELLA
Address 1766 N.W. 95 STREET
City-State-Zip: MIAMI FL 33147

Title CFO
Name MORTIMER, LAFARIES
Address 3230 N.W. 151ST TERRACE
City-State-Zip: OPA LOCKA FL 33054

Title COO
Name TAYLOR, KANISHA
Address 1766 N.W. 95 STREET
City-State-Zip: MIAMI FL 33147

Title DIRECTOR
Name GIVENS, WILLIE MARY
Address 1766 N.W. 95 STREET
City-State-Zip: MIAMI FL 33147

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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: LAFARIES MORTIMER

CFO

01/31/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY
Name BROWNLEE, ANNIE M
Address 1766 N.W. 95 STREET
City-State-Zip: MIAMI FL 33147

Title DIRECTOR
Name HOLMES, GEORGE
Address 1766 N.W. 95 STREET
City-State-Zip: MIAMI FL 33147

Title DIRECTOR
Name KEMP, RENALDO
Address 1766 N.W. 95 STREET
City-State-Zip: MIAMI FL 33147