

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 762928

**Entity Name:** MT. OLIVE CHURCH, INC.**Current Principal Place of Business:**8400 N.W. 22ND AVE  
MIAMI, FL 33147**Current Mailing Address:**3040 N.W. 97TH STREET  
MIAMI, FL 33147 US**FEI Number: 65-0551216****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**SMITH, DAVID E  
3040 NW 97 STREET  
MIAMI, FL 33147 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:**

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Electronic Signature of Registered Agent

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Date**Officer/Director Detail :**

|                 |                  |
|-----------------|------------------|
| Title           | PD               |
| Name            | SMITH, DAVID E   |
| Address         | 3040 N.W. 97 ST. |
| City-State-Zip: | MIAMI FL 33147   |

|                 |                         |
|-----------------|-------------------------|
| Title           | SD                      |
| Name            | HENDERSON, SHAUNDRICK L |
| Address         | 3040 NW 97 STREET       |
| City-State-Zip: | MIAMI FL 33147          |

|                 |                        |
|-----------------|------------------------|
| Title           | TD                     |
| Name            | FAIRWEATHER, NEWTON    |
| Address         | 20240 N.W. 3RD AVENUE  |
| City-State-Zip: | MIAMI GARDENS FL 33169 |

|                 |                      |
|-----------------|----------------------|
| Title           | M                    |
| Name            | JONES, ROGER JR      |
| Address         | 7312 N.W. 7TH AVENUE |
| City-State-Zip: | MIAMI FL 33150       |

|                 |                       |
|-----------------|-----------------------|
| Title           | M                     |
| Name            | MASON, WAYNE          |
| Address         | 3000 N.W. 50TH STREET |
| City-State-Zip: | MIAMI FL 33142        |

|                 |                         |
|-----------------|-------------------------|
| Title           | M                       |
| Name            | TAYLOR, LEON            |
| Address         | 1417 N.W 33RD AVENUE    |
| City-State-Zip: | FT. LAUDERDALE FL 33311 |

|                 |                        |
|-----------------|------------------------|
| Title           | M                      |
| Name            | BARBER, DARYL          |
| Address         | 4520 N.W. 13TH COURT   |
| City-State-Zip: | FT LAUDERDALE FL 33313 |

*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: DAVID SMITH****PRESIDENT****02/24/2018**

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Electronic Signature of Signing Officer/Director Detail

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Date