

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000000952

**Entity Name:** MOUNT CALVARY PENTECOSTAL LOVING CHURCH INC**Current Principal Place of Business:**1039 PEACHTREE ST  
COCOA, FL 32922**Current Mailing Address:**P.O. BOX 778  
TITUSVILLE, FL 32781**FEI Number:** 26-1938541**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JAMES, NIGEL O  
1039 PEACHTREE ST  
COCOA, FL 32922 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            | JAMES, NIGEL O      |
| Address         | P.O. BOX 778        |
| City-State-Zip: | TITUSVILLE FL 32781 |

|                 |                     |
|-----------------|---------------------|
| Title           | VP                  |
| Name            | JAMES, MURPHY       |
| Address         | P.O. BOX 778        |
| City-State-Zip: | TITUSVILLE FL 32781 |

|                 |                     |
|-----------------|---------------------|
| Title           | D, TREASURER        |
| Name            | JAMES, SIMMONE      |
| Address         | P.O. BOX 778        |
| City-State-Zip: | TITUSVILLE FL 32781 |

|                 |                     |
|-----------------|---------------------|
| Title           | D                   |
| Name            | JAMES, MAUDE        |
| Address         | P.O. BOX 778        |
| City-State-Zip: | TITUSVILLE FL 32781 |

|                 |                     |
|-----------------|---------------------|
| Title           | D, SECRETARY        |
| Name            | JAMES, JESSIE       |
| Address         | P.O. BOX 778        |
| City-State-Zip: | TITUSVILLE FL 32781 |

|                 |                     |
|-----------------|---------------------|
| Title           | DIRECTOR            |
| Name            | SMITH, HELENA       |
| Address         | P.O. BOX 778        |
| City-State-Zip: | TITUSVILLE FL 32781 |

*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: NIGEL JAMES****PRESIDENT****05/20/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date