

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000004294

**FILED**  
**May 15, 2015**  
**Secretary of State**  
**CC2705114456**

**Entity Name:** MT HERMAN BAPTIST CHURCH, INC

**Current Principal Place of Business:**

524 CAMPANELLA AVENUE  
ORLANDO, FL 32811

**Current Mailing Address:**

524 CAMPANELLA AVE.  
ORLANDO, FL 32811

**FEI Number:** 27-1698323

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HARRIS, STACY  
524 CAMPANELLA AVE  
ORLANDO, FL 32811 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 MR.  
Name GRIMES, HOSEA  
Address 524 CAMPANELLA AVE  
City-State-Zip: ORLANDO FL 32811

Title MR.  
Name PATTERSON, LLEWELLYN D  
Address 524 CAMPANELLA AVENUE  
City-State-Zip: ORLANDO FL 32811

Title MS.  
Name KING, SANDRA  
Address 524 CAMPANELLA AVE  
City-State-Zip: ORLANDO FL 32811

Title MS.  
Name COLSTON, DOROTHY  
Address 524 CAMPANELLA AVE  
City-State-Zip: ORLANDO FL 32811

Title MS.  
Name HARRIS, STACY L  
Address 524 CAMPANELLA AVENUE  
City-State-Zip: ORLANDO FL 32811

Title MR.  
Name ANDERSON, HENRY  
Address 524 CAMPANELLA AVENUE  
City-State-Zip: ORLANDO FL 32811

*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:** STACY HARRIS

**MS.**

**05/15/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date