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: BULAINE MOLME

Electronic Signature of Signing Officer/Director Detail

# DOCUMENT# N18000012123

### Entity Name: MOUNT OF OLIVES EVANGELICAL BAPTIST CHURCH INC.

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### **Current Principal Place of Business:**

7951 SOUTHGATE BLVD F5 NORTH LAUDERDALE, FL 33068

#### **Current Mailing Address:**

6165 BABCOCK ST. SE SUITE 3 PALM BAY, FL 32909 US

### FEI Number: 83-2362646

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

MOLME, JNMARC 7951 SOUTHGATE BLVD F5 NORTH LAUDERDALE, FL 33068 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:

## Officer/Director Detail -

Officer/Director Detail :				
Title	Р	Title	SEC	
Name	MOLME, JNMARC	Name	MOLME, BULAINE	
Address	7951 SOUTHGATE BLVD, F5	Address	7951 SOUTHGATE BLVD, F5	
City-State-Zip:	NORTH LAUDERDALE FL 33068	City-State-Zip:	NORTH LAUDERDALE FL 33068	
Title	TREA			
Name	MELIDOR, MERLANDE			
Address	1243 AMADOR AVE NW			
City-State-Zip:	PALM BAY FL 32907			

SECRETARY 05/01/2019

Certificate of Status Desired: No

FILED May 01, 2019 Secretary of State 1791980118CC

Date

Date