

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

DOCUMENT# N93000005696

**FILED**  
**May 01, 2014**  
**Secretary of State**  
**CC0439490131**

**Entity Name:** MT. OLIVE PRIMITIVE BAPTIST CHURCH OF JACKSONVILLE, INC.

**Current Principal Place of Business:**

1319 NORTH MYRTLE AVENUE  
JACKSONVILLE, FL 32209

**Current Mailing Address:**

POST OFFICE BOX 40845  
JACKSONVILLE, FL 32203 US

**FEI Number: 59-3359874**

**Certificate of Status Desired: Yes**

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

HARRIS, LEE E  
1319 NORTH MYRTLE AVENUE  
JACKSONVILLE, FL 32209 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 C  
Name HARRIS, LEE E  
Address 1319 NORTH MYRTLE AVENUE  
City-State-Zip: JACKSONVILLE FL 32209

Title D  
Name GEE, BIRNETT  
Address 2564 MINOSO CIRCLE WEST  
City-State-Zip: JACKSONVILLE FL 32209

Title D  
Name PIERCE, HAROLD  
Address 6720 GASPAR CIRCLE  
City-State-Zip: JACKSONVILLE FL 32218

Title T  
Name ROBINSON, STANLEY  
Address 2554 W. 43RD STREET  
City-State-Zip: JACKSONVILLE FL 32209

Title S  
Name BEST, WILLIAM A III  
Address 1319 NORTH MYRTLE AVENUE  
City-State-Zip: JACKSONVILLE FL 32209

Title D  
Name WIGGINS, RONALD D  
Address 4120 WILCREST CIRCLE W.  
City-State-Zip: JACKSONVILLE FL 32277

*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: LEE E. HARRIS**

**CHAIRMAN**

**05/01/2014**

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

\_\_\_\_\_  
Date