| 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 DR | ROSALIND OSGOOD |
|--------------|-----------------|

I

Electronic Signature of Signing Officer/Director Detail

# 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N9400005389

#### Entity Name: MOUNT OLIVE DEVELOPMENT CORPORATION

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

401 NW 9TH AVENUE FT. LAUDERDALE. FL 33311

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

401 NW 9TH AVENUE FT. LAUDERDALE. FL 33311 US

#### FEI Number: 65-0548855

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

OSGOOD, ROSALIND 401 NW 9TH AVENUE FORT LAUDERDALE, FL 33311 US

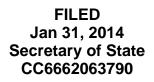
### Certificate of Status Desired: No

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 :** Title Title CEO С Name OSGOOD, DR. ROSALIND Name DAVIS, DAMON 401 NW 9TH AVENUE Address 401 NW 9TH AVENUE Address City-State-Zip: FT. LAUDERDALE FL 33311 City-State-Zip: FT. LAUDERDALE FL 33311 VC Title Title TREA BENNEFIELD, JACQUE Name **DIXON, NICOLE** Name Address 401 NW 9TH AVENUE Address 401 NW 9TH AVENUE FT. LAUDERDALE FL 33311 City-State-Zip: FT. LAUDERDALE FL 33311 City-State-Zip: Title SEC MORGAN, GEORGE Name 401 NW 9TH AVENUE Address City-State-Zip: FORT LAUDERDALE FL 33076

CEO



Date

Date