

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001760

Entity Name: MOUNT CARMEL COMMUNITY DEVELOPMENT
CORPORATION OF CLEARWATER, INC.**Current Principal Place of Business:**908 PALM BLUFF ST
CLEARWATER, FL 33755**Current Mailing Address:**908 PALM BLUFF STREET
CLEARWATER, FL 33755**FEI Number: 59-3452129****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**MICKENS, MAURICE E
2545 NE COACHMAN RD
211
CLEARWATER, FL 33765 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	DIRECTOR
Name	MICKENS, MAURICE E.
Address	2545 NE COACHMAN RD UNIT #211
City-State-Zip:	CLEARWATER FL 33765

Title	T
Name	SHERMAN, REGINALD
Address	908 PALM BLUFF ST
City-State-Zip:	CLEARWATER FL 33755

Title	D
Name	DAVIS, SOLOMON MR
Address	336 N BAYHILLS BLVD
City-State-Zip:	CLEARWATER FL 34695

Title	CORRESPONDING SECRETARY
Name	CRAWFORD, KIMBERLEY NUNN
Address	908 PALM BLUFF ST
City-State-Zip:	CLEARWATER FL 33755

Title	C
Name	WILLIAMS, NAOMI DR,
Address	1300 RIDGE AVENUE
City-State-Zip:	CLEARWATER FL 33755

Title	D
Name	RIVERO, MANUEL MR
Address	9208 ESTATE CIOVE DRIVE
City-State-Zip:	RIVERVIEW FL 33569

Title	SECRETARY
Name	SHERMAN, REGINA KD
Address	1688 EAGLE TRACE DRIVE
City-State-Zip:	PALM HARBOR FL 34685

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: MAURICE E. MICKENS**DIRECTOR****06/08/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date