2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002454

Entity Name: MOUNT MORIAH CHURCH, INCORPORATED

FILED Mar 04, 2024 Secretary of State 2942700623CC

Current Principal Place of Business:

8012 HWY 90 SNEADS, FL 32460

Current Mailing Address:

1611 GULF POWER ROAD SNEADS, FL 32460 US

FEI Number: 22-3889572 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KLENT, JAMES A 1611 GULF POWER ROAD SNEADS, FL 32460 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:

Date Electronic Signature of Registered Agent

Title

Officer/Director Detail :

Title PRESIDENT, CEO, DIRECTOR, Title VP, CFO, DIRECTOR, ELDER,

ELDER, PRIEST, BISHOP PASTOR, MOTHER

JAMES, KLENT A JAMES, ELOUISE M Name Name

1611 GULF POWER ROAD 1611 GULF POWER ROAD Address Address

City-State-Zip: SNEADS FL 32460 City-State-Zip: SNEADS FL 32460

Title DIRECTOR, TRUSTEE, MINISTER, Title ASST. SECRETARY, DIRECTOR

ELDER MARLOW, CHER Name MARLOW, TONY D Name

8028 YELLOW MOON RD. Address 3058 CURRYWOODS DR Address

City-State-Zip: TALLAHASSEE FL 32324 ORLANDO FL 32822 City-State-Zip:

Title TREASURER, DIRECTOR,

DIRECTOR, TRUSTEE, ELDER CORRESPONDING SECRETARY, **ELDER**

Name DAVIS, CLARENCE

Name PENDER, JACKIE Address 1100 HWY 73

Address 4254 CENTURY ROAD City-State-Zip: MARIANNA FL 32448

City-State-Zip: GREENWOOD FL 32443

Title DIRECTOR, ASST. TREASURER

Title DIRECTOR, ELDER, ASST. Name BROWN, JALEN

TREASURER, ASST. PASTOR Address 8012 HWY 90 WEST Name DAVIS, PLASSIE

City-State-Zip: SNEADS FL 32460 1100 HWY 73 Address

MARIANNA FL 32448 City-State-Zip: Continues on page 2

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.

03/04/2024 **PASTOR** SIGNATURE: ELOUISE JAMES

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR, EXECUTIVE SECRETARY, TRUSTEE

Name DOZIER, CAROLYN

Address 8012 HWY 90

City-State-Zip: SNEADS FL 32460