2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#718657

FILED Feb 05, 2009 Secretary of State

Entity Name: ORTHODOX ZION PRIMITIVE BAPTIST CHURCH, INC.

Current Principal Place of Business:				New Princ	New Principal Place of Business:		
	TRIALIAN AVE LM BEACH, F		US				
Current Mailing Address:				New Maili	New Mailing Address:		
2900 N. AUSTRIALIAN AVE WEST PALM BEACH, FL 33407 US			US		2900 AUSTRIALIAN AVE WEST PALM BEACH, FL 33401 US		
FEI Number	: 65-0328689	FEI Num	ber Applied For()	FEI Number Not Appl	icable () Certificate of Status Desired ()		
Name and	d Address of	Current Re	egistered Agent:	Name and	Address of New Registered Agent:		
The above	ADWAY 1 LM BEACH, F anamed entity			ourpose of changing i	ts registered office or registered agent, or both		
	e of Florida.						
SIGNATU		nic Signatu	re of Registered Age	ent	Date		
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	P (CHESTER, JA 1730 ECHO L/ WEST PALM E	KE DRIVE	3407	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	S (PAYNE, KENN 391 W. 32ND (RIVIERA BEAC	ST	4	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	T (BUSH, HORAC 5011 ELPINE ' PALM BEACH	ΛΑΥ	FL 33418	Title: Name: Address: City-St-Zip:	T (X) Change () Addition JOHNSON, MICHAEL 3162 BOLLARD ROAD WEST PALM BEACH, FL 33411		
Title: Name: Address: City-St-Zip:	D (PRINCE, ROB 1340 STONEH ROYAL PALM	AVEN ESTAT		Title: Name: Address: City-St-Zip:	V (X) Change () Addition PRINCE, ROBERT N SR. 1340 STONEHAVEN ESTATES DR ROYAL PALM BEACH, FL 33411		
Title: Name: Address: City-St-Zip:	ss: 3808 HEATH CIR SOUTH			Title: Name: Address: City-St-Zip:	D (X) Change () Addition CRYUS, SAMUEL 3808 HEATH CIR SOUTH WEST PALM BEACH, FL 33407		
Title: Name: Address: City-St-Zip:	BENBOW, MA 15861 LISBON			Title: Name: Address: City-St-Zip:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES H. CHESTER P 02/05/2009