2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007
Secretary of State

DOCUMENT# N00000006354

Entity Name: GREATER MOUNT ZION AFRICAN METHODIST EPISCOPAL CHURCH, INC OF ARCADIA

Current Principal Place of Business:

256 S. ORANGE AVE.
ARCADIA, FL 34266

New Principal Place of Business:

Current Mailing Address:

PO BOX 1266
ARCADIA, FL 34265

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FAYE, WILLIAMS R
1473 SW HARLEM CIR
ARCADIA, FL 34266 US

Name and Address of New Registered Agent:

BRAZELL, WESLEY
147 ASBURY STREET
ARCADIA, FL 34266 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: WESLEY BRAZELL 01/16/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PCD ( ) Delete
Name: LEVERETT, RICHARD D SR.
Address: PO BOX 1266
City-St-Zip: ARCADIA, FL 34265

Title: SD ( ) Delete
Name: WILLIAMS, RHONDA FAYE
Address: 1473 SW HARLEM CIR.
City-St-Zip: ARCADIA, FL 34266

Title: T ( ) Delete
Name: ROSS, LOUIS
Address: 1880 PEACH DR
City-St-Zip: ARCADIA, FL 34266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD (X) Change ( ) Addition
Name: BRAZELL, WESLEY
Address: 147 ASBURY STREET
City-St-Zip: ARCADIA, FL 34266

Title: SD (X) Change ( ) Addition
Name: ALLEN, KAREN
Address: P O BOX 1403
City-St-Zip: ARCADIA, FL 34266

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: WESLEY BRAZELL OFFI 01/16/2007
Electronic Signature of Signing Officer or Director Date