2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400000826

FILED Sep 23, 2009 Secretary of State

Entity Name: MOUNT SION - THE CITY OF THE LIVING GOD, INC.

Current Principal Place of Business: New Principal Place of Business: 8741 NW 34TH AVENUE ROAD MIAMI, FL 33147 **Current Mailing Address: New Mailing Address:** 8741 NW 34TH AVENUE ROAD MIAMI, FL 33147 FEI Number: 77-0622093 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COLLIER, ALLEN 17631 NW 15 COURT MIAMI GARDENS, FL 33056 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete COLLIER, ALLEN Name: Name: 17631 NW 15 COURT Address: Address: City-St-Zip: MIAMI GARDENS, FL 33056 City-St-Zip: Title: Title: () Delete () Change () Addition BURROWS, DARYL Name: Name: Address: POST OFFICE BOX 551933 Address: City-St-Zip: MIAMI GARDENS, FL 33055 City-St-Zip: Title: VPD () Delete Title: () Change () Addition ALLEN, LILLIAN Name: Name: 8741 NW 34TH AVENUE-ROAD Address: Address: City-St-Zip: MIAMI, FL 33147 US City-St-Zip: Title: SD () Delete Title: () Change () Addition MONTGOMERY, JOVAN Name: Name: 1550 W 121 STREET Address: Address: City-St-Zip: MIAMI, FL 33167 City-St-Zip: Title: ASD () Delete Title: TD (X) Change () Addition COLLIER, JAMES R JR. COLLIER, JAMES R JR. Name: Name: 8551 NW 23 AVENUE 8551 NW 23 AVENUE Address: Address: City-St-Zip: PEMBROKE PINES, FL City-St-Zip: PEMBROKE PINES, FL Title: () Delete Title: (X) Change () Addition GAINER, DOROTHY GAINER, DOROTHY Name: Name: Address: 2012 NW 84 STREET Address: 2012 NW 84 STREET MIAMI, FL 33147 City-St-Zip: MIAMI, FL 33147 City-St-Zip:

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: ALLEN COLLIER PRES 09/23/2009