

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N09902 (0)
1. Corporation Name
MOUNT ZION APOSTOLIC FAITH CHURCH, INC.

Principal Place of Business % MRS. WASHINGTON 1821 H AVENUE EAST RIVIERA BCH. FL 33404	Mailing Address % MRS. WASHINGTON 1821 H AVENUE EAST RIVIERA BCH. FL 33404
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/24/1985	3a. Date of Last Report 08/01/1994
4. FEI Number 59-2612323	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ \$68.75 Supplemental Fee Not Required	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State 23	City & State 28
Zip 24	Zip 29
County 25	County 30

9. Name and Address of Current Registered Agent
**WASHINGTON, CHARLES SR.
1821 H AVE. EAST
RIVIERA BEACH FL 33404**

10. Name and Address of New Registered Agent

81 Name Charles Washington Sr.
82 Street Address (P.O. Box Number is Not Acceptable) 8781 W. BATES RD
83
84 City Palm Beach Gardens FL
85 Zip Code 33418

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Charles W. Washington SR. (Typed Name of Registered Agent and Date of Signature)

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	NAME WASHINGTON, CHARLES W.	1.1 TITLE PD	Change ☒ Addition ☐
STREET ADDRESS 1821 H AVENUE EAST		1.2 NAME Charles Washington	
CITY, ST, ZIP RIVIERA BEACH FL		1.3 STREET ADDRESS 8781 W. BATES RD	
		1.4 CITY, ST, ZIP Palm Beach Gardens FL 33418	
TITLE VD	NAME WASHINGTON, GEORGIA ANN	2.1 TITLE VD	Change ☒ Addition ☐
STREET ADDRESS 1821 H AVENUE EAST		2.2 NAME Georgia Ann Washington	
CITY, ST, ZIP RIVIERA BEACH FL		2.3 STREET ADDRESS 8781 W. BATES RD	
		2.4 CITY, ST, ZIP Palm Beach Gardens FL 33418	
TITLE VD	NAME STARKS, RUTH	3.1 TITLE	Change ☐ Addition ☐
STREET ADDRESS 1633 DOUGLAS AVENUE		3.2 NAME	
CITY, ST, ZIP W. PALM BEACH FL		3.3 STREET ADDRESS	
		3.4 CITY, ST, ZIP	
TITLE SD	NAME BLUNTSON, LULA	4.1 TITLE	Change ☐ Addition ☐
STREET ADDRESS 922 30TH COURT		4.2 NAME	
CITY, ST, ZIP W. PALM BEACH FL		4.3 STREET ADDRESS	
		4.4 CITY, ST, ZIP	
TITLE TD	NAME GILL, SHIRLEY	5.1 TITLE	Change ☐ Addition ☐
STREET ADDRESS 734 PALM STREET		5.2 NAME	
CITY, ST, ZIP W. PALM BEACH FL		5.3 STREET ADDRESS	
		5.4 CITY, ST, ZIP	
TITLE	NAME	6.1 TITLE	Change ☐ Addition ☐
STREET ADDRESS		6.2 NAME	
CITY, ST, ZIP		6.3 STREET ADDRESS	
		6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(g), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Charles W. Washington SR. (Typed Name of Signing Officer or Director) 4/28/95 (Date) (407)-848-9135 (Telephone Number)