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Secretary of State

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NONPROFIT
 CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N50992

1. Corporation Name
MOUNT ZION HOUSE OF PRAYER HOLINESS CHURCH INC.

Principal Place of Business
 1903 HOUSTON AVE.
 VALDOSTA GA 31602

Mailing Address
 1903 HOUSTON AVE.
 VALDOSTA GA 31602



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		09/24/1992	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-3135957	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>	
23		28		\$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
24		29		30	
Country		Country		\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
MCDANIEL, FOREST 1300 ML KING DR #A-1 MADISON FL 32340				81	Name <i>McDaniel, Forrest</i>		
				82	Street Address (P.O. Box Number is Not Acceptable) <i>616 W BUNKER STREET</i>		
				83			
				84	City <i>MADISON</i>	85	FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: *Forrest McDaniel* *Forrest McDaniel* DATE: *4/20/99*

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VATO <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MATHIS, CATHERINE M.	1.2 NAME	
STREET ADDRESS	1903 HOUSTON AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	VALDOSTA GA	1.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUNEAL, ALEXANDER	2.2 NAME	
STREET ADDRESS	ROUTE 1 BOX 7	2.3 STREET ADDRESS	
CITY-ST-ZIP	PINETTA FL	2.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCDANIEL, BARBARA	3.2 NAME	<i>McDaniel, Barbara</i>
STREET ADDRESS	1300 MLKING DR #A1	3.3 STREET ADDRESS	<i>616 W BUNKER STREET</i>
CITY-ST-ZIP	MADISON FL	3.4 CITY-ST-ZIP	<i>MADISON FL 32340</i>
TITLE	PDC <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MATHIS, ERIC J	4.2 NAME	Eric J Mathis
STREET ADDRESS	1903 HOUSTON AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	VALDOSTA GA	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE: *Eric J Mathis* **SIGNATURE REQUIRED** DATE: *4.20.99* DAYTIME PHONE #: *912-259-5542*

Signature, typed or printed name of signing officer or director

CR2E037 (1/198)