

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000000826

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

**Current Principal Place of Business:**

8741 NW 34TH AVENUE ROAD  
MIAMI, FL 33147

**Current Mailing Address:**

8741 NW 34TH AVENUE ROAD  
MIAMI, FL 33147 US

**FEI Number: 77-0622093**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

COLLIER, ALLEN  
8741 NW 34TH AVENUE ROAD  
MIAMI GARDENS, FL 33147 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

**Officer/Director Detail :**

Title PD  
Name COLLIER, ALLEN  
Address 8741 NW 34TH AVENUE ROAD  
City-State-Zip: MIAMI GARDENS FL 33147

Title D  
Name BURROWS, DARYL  
Address POST OFFICE BOX 551933  
City-State-Zip: MIAMI GARDENS FL 33055

Title VPD  
Name ALLEN, LILLIAN  
Address 8741 NW 34TH AVENUE-ROAD  
City-State-Zip: MIAMI FL 33147

Title SD  
Name MONTGOMERY, JOVAN  
Address 1550 W 121 STREET  
City-State-Zip: MIAMI FL 33167

Title TD  
Name COLLIER, JAMES RJR.  
Address 8551 NW 23 AVENUE  
City-State-Zip: PEMBROKE PINES FL

Title ASD  
Name GAINER, DOROTHY  
Address 2012 NW 84 STREET  
City-State-Zip: MIAMI FL 33147

*I hereby 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 all other like empowered.*

**SIGNATURE: ALLEN COLLIER**

**PD**

**04/27/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date