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	: MILTON WILLIAMS		02/26/2014
	Electronic Signature of Registered Agent		Date
Officer/Director Detail :			
Title	D	Title	D
Name	WILLIAM, MILTON	Name	DOWLING, LAWRENCE
Address	15818 SW 150TH ST	Address	16840 SW MAGNOLIA ST
City-State-Zip:	INDIANTOWN FL 34956	City-State-Zip:	INDIANTOWN FL 34956
Title	D	Title	D
Name	DOWLING, CHARLOTTE	Name	COBBS, DOROTHY
Address	16840 SW MAGNOLIA ST	Address	200 SOUTH WEST ALLAPHTTAH RD
City-State-Zip:	INDIANTOWN FL 34956	City-State-Zip:	INDIANTOWN FL 34956
Title	D		
Name	PERRY, MERCY		
Address	14930 SOUTH WEST 173RD		
City-State-Zip:	INDIANTOWN FL 34956		

FL. INCORPORATED

INDIANTOWN, FL 34956

INDIANTOWN, FL 34956

Current Mailing Address:

14789 S.W. MARTIN LUTHER KING DR

P.O.BOX1918

FEI Number: NOT APPLICABLE

Current Principal Place of Business:

Name and Address of Current Registered Agent:

WILLIAMS, MILTON 14840 SW MAGNOLIA ST

INDIANTOWN, FL 34956 US

DOCUMENT# N1000001055

Entity Name: MT. ZION MISSIONARY BAPTIST CHURCH OF INDIANTOWN,

Feb 26, 2014 Secretary of State CC5891502452

FILED

Certificate of Status Desired: No

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: MILTON WILLIAM

02/26/2014

Electronic Signature of Signing Officer/Director Detail

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT