

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000001443

Entity Name: MOUNT ZION AFRICAN METHODIST EPISCOPAL CHURCH
CRESTVIEW,FL, INC.**FILED**
Aug 04, 2021
Secretary of State
6883796990CC**Current Principal Place of Business:**502 MCDONALD STREET
CRESTVIEW, FL 32536**Current Mailing Address:**502 MCDONALD STREET
CRESTVIEW, FL 32536 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**RILEY, ANN S REV
1290 MAZUREK BLVD
PENSACOLA, FL 32514 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:** ANN S. RILEY**08/04/2021**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP	Title	SECRETARY
Name	FLAVORS, SHERRY	Name	HANNER, SHELITA
Address	612 MAGNOLIA LANE	Address	2935 CHANCEL AVE
City-State-Zip:	CRESTVIEW FL 32539	City-State-Zip:	CRESTVIEW FL 32539
Title	TRUSTEE	Title	TREASURER
Name	BLACKSHEAR, HENRY	Name	GERMAN, ROSETTA
Address	4804 YOUNG ROAD	Address	5380 CONSTITUTION ROAD
City-State-Zip:	CRESTVIEW FL 32539	City-State-Zip:	CRESTVIEW FL 32539
Title	TRUSTEE	Title	PASTOR
Name	HAYNES, MALCOLM N SR	Name	RILEY, ANN S REV
Address	298 SOUTH WILSON STREET	Address	1290 MAZUREK BLVD
City-State-Zip:	CRESTVIEW FL 32536	City-State-Zip:	PENSACOLA FL 32514

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: ROSETTA GERMAN**TREASURER****08/04/2021**

Electronic Signature of Signing Officer/Director Detail

Date