

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700737

FILED  
Feb 16, 2005  
Secretary of State

**Entity Name:** MT. ZION PRIMITIVE BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

3700 22ND AVENUE SOUTH  
ST. PETERSBURG, FL 33711

**New Principal Place of Business:**

**Current Mailing Address:**

3700 22ND AVENUE SOUTH  
ST. PETERSBURG, FL 33711

**New Mailing Address:**

**FEI Number:** 62-1513493

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

JOHNSON, ALBERT L  
435 - 25TH AVENUE SOUTH  
SAINT PETERSBURG, FL 33711 US

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

PETERSON, AUSTIN  
2318 HIGHLAND STREET SOUTH  
SAINT PETERSBURG, FL 33705 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: AUSTIN PETERSON

02/16/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: C ( ) Delete  
Name: RIGGINS, KEITH B  
Address: 2835 64TH AVE SO.  
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: PC ( ) Delete  
Name: SMITH, JANICE A  
Address: 2835 - SECOND AVENUE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: D ( ) Delete  
Name: BRANCH, ROSEMARY  
Address: P.O. BOX 13728 N/A  
City-St-Zip: ST. PETERBURG, FL 33733

Title: TD ( ) Delete  
Name: CLOUDEN, ANGELA R  
Address: 6200 CANTON STREET SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: D ( ) Delete  
Name: PARHAM, ROBERT  
Address: 4025 FAIRFIELD AVE SQ.  
City-St-Zip: SAINT PETERSBURG, FL 33714

Title: S ( ) Delete  
Name: SPEIGHTS, OPHELIA,  
Address: 1824-56TH PL S. #D  
City-St-Zip: ST. PETERSBURG, FL 33712

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: CASSAWAY, TISHA  
Address: 3918 11TH AVENUE NORTH  
City-St-Zip: ST. PETERSBURG, FL 33713

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

SIGNATURE: ROSEMARY BRANCH

D

02/16/2005

Electronic Signature of Signing Officer or Director

Date