

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700737

FILED
Jul 10, 2006
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)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

BAILEY, GLENN M
3700 22ND AVENUE SOUTH
SAINT PETERSBURG, FL 33711 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: GLENN M. BAILEY

07/10/2006

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: CASSAWAY, TISHA
Address: 3918 11TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33713

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: GLENN M. BAILEY

D

07/10/2006

Electronic Signature of Signing Officer or Director

Date