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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 703684

1. Corporation Name
MT ZION GOD CHURCH THE HOUSE OF UNITY, INC.

393507 - 90232 - 32

Principal Place of Business
844 NW 13TH TERR.
FORT LAUDERDALE FL 33311
US

Mailing Address
822 NORTHWEST 4TH ST /UNITY INC
FT LAUDERDALE FL 33311-9020

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 03/08/1962
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 70-3684160 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip / Country 24 / 25	Zip / Country 29 / 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

JACKSON,WILLIE
822 NORTHWEST 4TH ST
FORT LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	RUCKER, JOHNNIE		1.2 NAME	
STREET ADDRESS	3469 NW 25TH ST.		1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MCDONALD, IDA MAE		2.2 NAME	
STREET ADDRESS	641 S.W. 29TH TERR.		2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL		2. 4 CITY-ST-ZIP	
TITLE	P	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	JACKSON, WILLIE		3.2 NAME	
STREET ADDRESS	822 NW 4TH ST.		3.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4. CITY-ST-ZIP	
TITLE	S	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	JACKSON, CARRIE		4. 2 NAME	
STREET ADDRESS	416 1/2 N.W. 10TH AVE		4.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 33211		4.4 CITY-ST-ZIP	
TITLE	T	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	RUCKER, EARLEEN		5.2 NAME	
STREET ADDRESS	3469 NW 25TH ST		5.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL		5.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	DAILEY, BEN		6.2 NAME	
STREET ADDRESS	1530 NW 8TH ST.		6.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Willie Jackson 4, 18, 1999
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)