


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 02, 2005 8:00 am**  
**Secretary of State**

03-02-2005 90084 010 \*\*\*\*61.25

<b>DOCUMENT # 706369</b> 1. Entity Name <b>THE MOUNT ZION BAPTIST CHURCH OF PENSACOLA, FLORIDA, INCORPORATED</b>					
Principal Place of Business <b>P.O. BOX 808 PENSACOLA FL 32591</b>		Mailing Address <b>P.O. BOX 808 PENSACOLA FL 32591</b>			
2. Principal Place of Business Suite, Apt. #, etc. <b>528 West Jackson Street</b> City & State <b>Pensacola, Florida</b> Zip <b>32501</b>		3. Mailing Address Suite, Apt. #, etc.  City & State  Zip  Country <b>USA</b>		 1st MOORE CR2E037 (10/04)	
4. FEI Number <b>59-2088552</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				6. Name and Address of Current Registered Agent  <b>ENGLISH, ROBERT 8577 WESTVIEW LANE PENSACOLA FL 32514</b>	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code				8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW FEE IS \$61.25 Due By May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make Check Payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>C</b> <b>ENGLISH, ROBERT</b> <b>8577 WESTVIEW LANE</b> <b>PENSACOLA FL 32504</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VC</b> <b>DILLON, VINCENCE</b> <b>6260 LAKE CHARLENE DRIVE</b> <b>PENSACOLA FL 32506</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>CANNON, JANESTHER</b> <b>3017 CEDARWOOD LANE</b> <b>PENSACOLA FL 32504</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD</b> <b>LEWIS, CLARA C</b> <b>408 LADYBIRD LANDE</b> <b>PENSACOLA FL 32503</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BOOKER, YAUNA</b> <b>4650 TRADEWIND DRIVE</b> <b>PENSACOLA FL 32514</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>Dailey, Yauna Booker</b> <b>1828 Condor Drive</b> <b>Cantonment, FL 32533</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>PAYNE, MATTHEW II PAST</b> <b>611 NORTH "F" STREET</b> <b>PENSACOLA FL 32501</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE: Robert English</b> <i>Robert L. English</i> <b>Feb 29, 2005</b> <b>(850) 452-8517</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					