

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **710454** (0)
1. Corporation Name
ZION HILL MISSIONARY BAPTIST CHURCH, INCORPORATE
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Principal Place of Business 2385 N.W. 60TH STREET MIAMI FL 33142		Mailing Address 2385 N.W. 60TH STREET MIAMI FL 33142		3. Date Incorporated or Qualified 03/01/1966	
2. Principal Place of Business 21		2a. Mailing Address 26		4. FEI Number 65-0058796	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
City & State 23		City & State 28		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Zip 24		Country 25		7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No	
Zip 29		Country 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent SHELTON-WILLIAMS, MARY 1323 NW 15 AVENUE 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	☐ DELETE		1.1 TITLE	☐ Change	☐ Addition	
NAME	PERSONS, JIMMIE L REV			1.2 NAME			
STREET ADDRESS	13233 SW 255TH TERR			1.3 STREET ADDRESS			
CITY - ST - ZIP	MIAMI FL			1.4 CITY - ST - ZIP			
TITLE	SD	☐ DELETE		2.1 TITLE	☐ Change	☐ Addition	
NAME	SHELTON-WILLIAMS, MARY			2.2 NAME			
STREET ADDRESS	1323 N.W. 15 AVE			2.3 STREET ADDRESS			
CITY - ST - ZIP	FT LAUDERDALE FL			2.4 CITY - ST - ZIP			
TITLE	TD	☐ DELETE		3.1 TITLE	☐ Change	☐ Addition	
NAME	HARRIS, CHARLIE			3.2 NAME			
STREET ADDRESS	5240 NW 30 PL			3.3 STREET ADDRESS			
CITY - ST - ZIP	MIAMI FL			3.4 CITY - ST - ZIP			
TITLE		☐ DELETE		4.1 TITLE	☐ Change	☐ Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY - ST - ZIP				4.4 CITY - ST - ZIP			
TITLE		☐ DELETE		5.1 TITLE	☐ Change	☐ Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY - ST - ZIP				5.4 CITY - ST - ZIP			
TITLE		☐ DELETE		6.1 TITLE	☐ Change	☐ Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY - ST - ZIP				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.

SIGNATURE: *Mary Shelton-Williams* **MARY Shelton-Williams** 4-14-98 9834 3087

CR2E037 (10/97)