


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2006 08:00 AM
Secretary of State

DOCUMENT # 710454		
1. Entity Name ZION HILL MISSIONARY BAPTIST CHURCH, INCORPORATED		
Principal Place of Business 2385 N.W. 60TH STREET MIAMI, FL 33142	Mailing Address 2385 N.W. 60TH STREET MIAMI, FL 33142	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SHELTON-WILLIAMS, MARY 1323 NW 15 AVENUE FORT LAUDERDALE, FL 33311		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling)</small> DATE _____		
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD PERSONS, JIMMIE L REV 13233 SW 255TH TERR MIAMI, FL	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD SHELTON-WILLIAMS, MARY 1323 N.W. 15 AVE FT LAUDERDALE, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD HARRIS, CHARLIE 5240 NW 30 PL MIAMI, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.		
SIGNATURE: <i>Mary Shelton Williams</i> - MARY Shelton Williams 4/25/06 954-320-5362		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>



04242006 No Chg-NP CR2E037 (11/05)

4. FEI Number 65-0058796	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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05/09/06-80048-015 61.25