

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710644

FILED
Sep 05, 2007
Secretary of State

Entity Name: GREATER MOUNT ZION A.M.E. CHURCH,INC. OF DANIA, FLORIDA

Current Principal Place of Business:

215 N.W. 5TH AVENUE
DANIA, FL 33004

New Principal Place of Business:

215 N.W. 5TH AVENUE
DANIA BEACH, FL 33004

Current Mailing Address:

215 N.W. 5TH AVENUE
DANIA, FL 33004

New Mailing Address:

215 N.W. 5TH AVENUE
DANIA BEACH, FL 33004

FEI Number: 59-2168322 **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:

ROBINSON, SHELLIE
231 N.W. 12TH COURT
DANIA, FL 33004 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROBINSON, SHELLIE
Address: 231 NW 12TH COURT
City-St-Zip: DANIA, FL

Title: SD () Delete
Name: BLAIZE, LATASHA
Address: 11256 TAFT STREET
City-St-Zip: PEMBROKE LAKES, FL 33026

Title: TD () Delete
Name: ADDERLY, JACOB,
Address: 110 N.W. 11TH AVENUE
City-St-Zip: DANIA, FL

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:

I hereby certify that the information supplied with this filing does not qualify 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: SHELLIE ROBINSON

PD

09/05/2007

Electronic Signature of Signing Officer or Director

_____ Date