

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719489

FILED  
May 11, 2009  
Secretary of State

**Entity Name:** MT. ZION AFRICAN METHODIST EPISCOPAL CHURCH OF DAYTONA BEACH, INC.

**Current Principal Place of Business:**

449 S. MARTIN LUTHER KING JR., BLVD.  
DAYTONA BEACH, FL 32114

**New Principal Place of Business:**

**Current Mailing Address:**

449 S. MARTIN LUTHER KING JR., BLVD.  
DAYTONA BEACH, FL 32114

**New Mailing Address:**

**FEI Number:** 59-3483109      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

LASSITER, II, WALTER J REV  
449 S. DR. M.L. KING JR. BLVD  
DAYTONA BEACH, FL 32114      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: P      ( ) Delete  
Name: LASSITER, II, WALTER J REV  
Address: 410 SOUTH STREET  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: V      ( ) Delete  
Name: CRUSE, TOM  
Address: 601 MADISON AVE  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: S      ( ) Delete  
Name: WILEY, JEROME  
Address: 321 CEDAR STREET  
City-St-Zip: DAYTONA BCH, FL 32114

Title: D      ( ) Delete  
Name: HAWKINS, SUE  
Address: 1241 CADILLAC DR  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D      ( ) Delete  
Name: ADAMS, MATTIE  
Address: 748 WESTMORELAND ROAD  
City-St-Zip: DAYTONA BEACH, FL 32114

**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:

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: WALTER J. LASSITER,II

P

05/11/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date