2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732444

FILED Apr 09, 2009 Secretary of State

Entity Name: ZION CHURCH OF JESUS CHRIST, INC.

Current Principal Place of Business: New Principal Place of Business: 3700 W. ROBINSON STREET ORLANDO, FL 32805 **Current Mailing Address: New Mailing Address:** P.O. BOX 618281 ORLANDO, FL 32861 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BISHOP ALVIN PALMER, SR. 3700 W. ROBINSON STŔEET ORLANDO, FL 32805 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PALMER, ALVIN SR. Name: Name: 3700 W. ROBINSON STREET Address: Address: City-St-Zip: ORLANDO, FL 32805 City-St-Zip: Title: VD () Delete Title: () Change () Addition CARROLL, JAMES R Name: Name: Address: 143629 W. SIERRA ST. Address: City-St-Zip: SURPRISE, AZ 85379 City-St-Zip: Title: () Delete Title: () Change () Addition JOHNSON, CHRISTINE Name: Name: 2336 NEW HAVEN PL Address: Address: City-St-Zip: CONYERS, GA 300943323 City-St-Zip: (X) Change () Addition Title: SD () Delete Title: SD Name: PALMER, MARGARET Name: PALMER, MARGARET F 3700 W. ROBINSON STREET 3700 W. ROBINSON STREET Address: Address: ORLANDO, FL City-St-Zip: City-St-Zip: ORLANDO, FL 32805 Title: DT () Delete Title: () Change () Addition CARROLL, RAQUEL L Name: Name: 14329 W. SIERRA ST. Address: Address: City-St-Zip: SURPRISE, AZ 85379 City-St-Zip: Title: () Delete Title: () Change () Addition DAVIS, BEATRICE F Name: Name: Address: 7736 PINEAPPLE DR. Address: ORLANDO, FL 32811 City-St-Zip: 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: MARGARET F. PALMER SD 04/09/2009