

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 738278

1. Entity Name

THE HISTORIC MOUNT ZION MISSIONARY BAPTIST CHURC

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90084 046 ****70.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business 301 N.W. 9TH ST. MIAMI FL 33136-3315 US		Mailing Address 301 N.W. 9TH ST. MIAMI FL 33136-3315 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-0799910		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MOORE, A.D. 301 N.W. 9TH ST. MIAMI FL 33136		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD WHITEHEAD, ARETHA 301 N.W. 9TH ST. MIAMI FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PLEASE CORRECT Whitehead, <u>Reatha</u> ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D COX, DANIEL A 301 NW 9 STR MIAMI FL ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D Brantley, Annette W. 301 NW 9th Street Miami, FL 33136 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD ABBITT EUPHRATES 301 NW 9TH STREET MIAMI FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REV. RALPH M. ROSS 301 N.W. 9TH ST. MIAMI FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	M/D (PLEASE CORRECT) ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRAPP, SETH 301 NW 9TH ST. MIAMI FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FSD BURKE, VANESSA 301 NW 9TH ST. MIAMI FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D (PLEASE CORRECT) ☒ Change ☐ Addition

12. 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 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: Euphrates Abbitt April 26, 2000 (305) 754-3783 (hmt)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)