

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744498

**FILED
Jul 04, 2004
Secretary of State**

Entity Name: NEW MOUNT ZION MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

221 NW 8TH AVE
P.O.BOX 1606
BOYNTON BECH, FL 33435

New Principal Place of Business:

221 NW 8TH AVE
P.O.BOX 1606
BOYNTON BECH, FL 33425

Current Mailing Address:

221 NW 8TH AVE
P.O.BOX 1606
BOYNTON BECH, FL 33435

New Mailing Address:

221 NW 8TH AVE
P.O.BOX 1606
BOYNTON BECH, FL 33425

FEI Number: 05-0044604

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FULLWOOD, WILBUR
205 N.E. 7TH AVENUE
BOYNTON BEACH, FL 33435 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: STD () Delete
Name: JOHNSON, MARGARET,
Address: 623 N.W. 5TH STREET
City-St-Zip: BOYNTON BEACH, FL

Title: VD () Delete
Name: COLLINS, LEONARD
Address: 504 NW 3RD STREET
City-St-Zip: BOYNTON BEACH, FL

Title: PD () Delete
Name: PERKINS, J.W.
Address: 1951 N.W. 1ST STREET
City-St-Zip: BOYNTON BEACH, FL 33435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JACKSON, DORIS
Address: 531 N.W. 10TH AVE.
City-St-Zip: BOYNTON BEACH, FL 33435

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 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 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: DORIS JACKSON

D

07/04/2004

Electronic Signature of Signing Officer or Director

Date