

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 744498

**FILED**  
**Oct 31, 2009**  
**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 33425

**New Principal Place of Business:**

221 NW 8TH AVE  
BOYNTON BECH, FL 33435

**Current Mailing Address:**

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

**New Mailing Address:**

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: WILBUR FULLWOOD

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

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

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

Title: D ( ) Delete  
Name: JOHNSON, MARGARET  
Address: 623 NW 5TH STREET  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D ( ) Delete  
Name: FULLWOOD, WILBUR  
Address: 205 N.E. 7TH AVENUE  
City-St-Zip: BOYNTON BEACH, FL 33435

**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: DORIS JACKSON

SDT

10/31/2009

Electronic Signature of Signing Officer or Director

Date