2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2006 08:00 AM
Secretary of State

DOCUMENT # 744889

1. Entity Name
NEW ZION PRIMITIVE BAPTIST CHURCH INC. OF TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
3845 MICCOSUKEE ROAD TALLAHASSEE, FL 32308	3845 MICCOSUKEE ROAD TALLAHASSEE, FL 32308

DO NOT WRITE IN THIS SPACE

01092006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-1190245
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GAINES, WILLIE M. PEMBERTON
3501 MICCOSUKEE ROAD
TALLAHASSEE, FL 32308

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

000000434296
02/24/06-80057-009 70.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	RUSH, F.R. (REV.)
STREET ADDRESS	2256 FLEISCHMANN RD
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	VD
NAME	GAINES, ROLAND H
STREET ADDRESS	22 ACORNRIDGE COURT
CITY-ST-ZIP	DURHAM, NC 27707
TITLE	SD
NAME	ROLLINGS, JOHN
STREET ADDRESS	8931 CELIA RD.
CITY-ST-ZIP	TALLAHASSEE, FL 32305
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. *I hereby certify that the information supplied with this filing does not qualify for the exemptions* contained 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 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: F.R. Rush 877-6667 (850) 877-2253
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #