## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#761609** 

FILED Jan 06, 2009 Secretary of State

Entity Name: MT. ZION BIBLE CHURCH OF PENSACOLA, INC.

Current Principal Place of Business:	New Principal Place of Business:

% JEFF POLLARD % STEVEN FRAKES

2603 WEST WRIGHT STREET
PENSACOLA, FL 32505
2603 WEST WRIGHT STREET
PENSACOLA, FL 32505
PENSACOLA, FL 32505

Current Mailing Address: New Mailing Address:

% JEFF POLLARD % STEVEN FRAKES

2603 WEST WRIGHT STREET
PENSACOLA, FL 32505
2603 WEST WRIGHT STREET
PENSACOLA, FL 32505
PENSACOLA, FL 32505

FEI Number: 59-2965131 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POLLARD, JEFF FRAKES, STEVEN 2603 WEST WRIGHT STREET 2603 WEST WRIGHT

2603 WEST WRIGHT STREET 2603 WEST WRIGHT STREET PENSACOLA, FL 33505 US PENSACOLA, FL 32505 US

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: STEVEN FRAKES 01/06/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 POLLARD, JEFF
 Name:

 Address:
 2603 WEST WRIGHT ST
 Address:

 City-St-Zip:
 PENSACOLA, FL 32505
 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 BROWN, COLBY
 Name:

 Address:
 6820 DEVONSHIRE CIR
 Address:

 City-St-Zip:
 PENSACOLA, FL 32506
 City-St-Zip:

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition

 Name:
 FRAKES, STEVEN
 Name:
 FRAKES, STEVEN

 Address:
 2603 W WRIGHT ST
 Address:
 2601 W WRIGHT ST

 City-St-Zip:
 PENSACOLA, FL 32505
 City-St-Zip:
 PENSACOLA, FL 32505

Title: SD () Delete Title: () Change () Addition

 Name:
 CARNLEY, DAVID
 Name:

 Address:
 6612 LEEPARD RD
 Address:

 City-St-Zip:
 MILTON, FL 32583
 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: STEVEN FRAKES VP 01/06/2009