

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 763491

FILED
Oct 07, 2007
Secretary of State

Entity Name: GREATER MOUNT ZION AFRICAN METHODIST EPISCOPAL CHURCH, INC.

Current Principal Place of Business:

870 N. MARTIN LUTHER KING BLVD.
SEBRING, FL 33870

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3743
SEBRING, FL 33871

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

YOUNG, MCKINLEY BISHOP
101 E. UNION ST.
JACKSONVILLE, FL 32203 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: BISHOP MCKINLEY YOUNG

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ANCRUM, RUBIN E
Address: 2205 E. O. DOUGLAS AVENUE
City-St-Zip: SEBRING, FL 33871 US

Title: D () Delete
Name: JACKSON, GWEN
Address: 404 VICKIE TERRACE
City-St-Zip: SEBRING, FL 33876 US

Title: D () Delete
Name: BROWN, JUNE
Address: 828 SHIRLEY STREET
City-St-Zip: SEBRING, FL 33870 US

Title: VD () Delete
Name: AARON, JAMES
Address: 1140 GRAND AVENUE
City-St-Zip: SEBRING, FL 33870 US

Title: S () Delete
Name: AARON, PRISCILLA G
Address: 1140 GRAND AVENUE
City-St-Zip: SEBRING, FL 33870 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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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: RUBIN E. ANCRUM

P

10/07/2007

Electronic Signature of Signing Officer or Director

Date