

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 13, 2005
Secretary of State**

DOCUMENT# 764284

Entity Name: NEW MOUNT ZION BAPTIST CHURCH, INC.

Current Principal Place of Business:

461 N.W. 8TH AVE.
FLORIDA CITY, FL 33034

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3476
FLORIDA CITY, FL 330343476 US

New Mailing Address:

FEI Number: 59-2369755 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERGUSON, LARRY, PASTOR
205 N.W. 7TH AVE.
FLORIDA CITY, FL 33034 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: FERNELLA PETERS, TREASURER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: LEE, JAMES W.
Address: 530 NW 11TH STREET
City-St-Zip: FLORIDA CITY, FL

Title: T () Delete
Name: PETERS, FERNELLA
Address: 12815 SW 1469 TER.
City-St-Zip: MIAMI, FL 33186

Title: S () Delete
Name: FAHIE, SELINA
Address: 864 SW 8TH CT
City-St-Zip: FLORIDA CITY, FL 33034

Title: PD () Delete
Name: FERGUSON, LARRY,
Address: 205 NW 7TH AVE.
City-St-Zip: FLORIDA CITY, FL

Title: TC () Delete
Name: FERGUSON, FRANKLIN
Address: 12815 SW 146 TERRACE
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: PETERS, FERNELLA
Address: P. O. BOX 771182
City-St-Zip: MIAMI, FL 33177

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

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

Title: TC (X) Change () Addition
Name: FERGUSON, FRANKLIN
Address: P. O. BOX 771182
City-St-Zip: MIAMI, FL 33177

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: FERNELLA PETERS

Electronic Signature of Signing Officer or Director

T

10/13/2005

Date