2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#764284

FILED Jun 02, 2008 Secretary of State

Entity Name: NEW MOUNT ZION BAPTIST CHURCH, INC.

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Current Principal Place of Business:		New Principal Place of Business:	
461 N.W. 8 FLORIDA C	TH AVE. CITY, FL 33034		
Current Mailing Address:		New Mailing Address:	
P.O. BOX 3 FLORIDA C	476 NTY, FL 330343476 US		
	59-2369755 FEI Number Applied For() FEI Nu e with s. 607.193(2)(b), F.S., the corporation did not receive Address of Current Registered Agent:		Certificate of Status Desired () of New Registered Agent:
FERNELLA 461 N. W. 8	3 3		
The above in the State	named entity submits this statement for the purpose of Florida.	of changing its registere	ed office or registered agent, or both,
SIGNATUR	E:		
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete RUSSELL, PHILLIP 861 S. W. 2ND STREET FLORIDA CITY, FL 33034	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VD () Delete FERGUSON, FRANKLIN P. O. BOX 771182 MIAMI, FL 33177	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	T () Delete PETERS, FERNELLA P. O. BOX 771182 MIAMI, FL 33177	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	S () Delete MINNIS, LORETTA 29822 S. W. 166TH COURT HOMESTEAD, FL 33033	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	TC () Delete FERGUSON, FRANKLIN P. O. BOX 771182 MIAMI, FL 33177	Title: Name: Address: City-St-Zip:	() Change () Addition

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: FERNELLA PETERS T 06/02/2008