

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769492

FILED  
Mar 26, 2011  
Secretary of State

**Entity Name:** MOUNT ZION HUMAN SERVICES, INC.

**Current Principal Place of Business:**

945 20TH STREET SOUTH  
ST. PETERSBURG, FL 33712 US

**New Principal Place of Business:**

**Current Mailing Address:**

945 20TH STREET SOUTH  
ST. PETERSBURG, FL 33712 US

**New Mailing Address:**

**FEI Number:** 59-2308721

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BELL, CHRIS  
1111 JUNGLE AVENUE NORTH  
SAINT PETERSBURG, FL 33710 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** BRONSON, JERELENE  
**Address:** 945 20TH STREET SOUTH  
**City-St-Zip:** SAINT PETERSBURG, FL 33712

**Title:** D  
**Name:** BROWN, ROSETTA  
**Address:** 945 20TH STREET SOUTH  
**City-St-Zip:** SAINT PETERSBURG, FL 33712

**Title:** C  
**Name:** BELL, CHRIS  
**Address:** 1111 JUNGLE AVENUE NORTH  
**City-St-Zip:** SAINT PETERSBURG, FL 33710

**Title:** D  
**Name:** FITTS, WILLIAM  
**Address:** 945 20TH STREET SOUTH  
**City-St-Zip:** SAINT PETERSBURG, FL 33712

**Title:** D  
**Name:** CARTER, VERNELL  
**Address:** 945 20TH STREET SOUTH  
**City-St-Zip:** SAINT PETERSBURG, FL 33712

**Title:** D  
**Name:** WALKER, TONI  
**Address:** 945 20TH STREET SOUTH  
**City-St-Zip:** SAINT PETERSBURG, FL 33712

I hereby 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 all other like empowered.

**SIGNATURE:** CHRIS BELL

C

03/26/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date