

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007279

FILED
Apr 25, 2011
Secretary of State

Entity Name: MT ZION A.M.E. CHURCH, INC.

Current Principal Place of Business:

417 OAKLAND AVE
OAKLAND, FL 34760

New Principal Place of Business:

Current Mailing Address:

PO BOX 484
OAKLAND, FL 34760

New Mailing Address:

FEI Number: 59-3632194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, CLAUDE JR.
13743 GLYNSHEL DR
WINTER GARDEN, FL 34787 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: P
Name: KENON, LEROY
Address: P.O. BOX 616309
City-St-Zip: ORLANDO, FL 32861

Title: V
Name: SMITH, OCTAVIUS L
Address: 5112 LABRADOR LN
City-St-Zip: ORLANDO, FL 32818

Title: ST
Name: NEDD, NICIE
Address: PO BOX 375
City-St-Zip: OAKLAND, FL 32760

Title: D
Name: ROBINSON, CLAUDE JR.
Address: 13743 GLYNSHEL DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

Title: T
Name: ALLEN, JEANETTE
Address: 511 WEST HULL AVENUE
City-St-Zip: OAKLAND, FL 34760

Title: D
Name: WRIGHT, JOSEPH
Address: 14775 BETINA STREET
City-St-Zip: WINTER GARDEN, FL 34787

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: CLAUDE ROBINSON, JR

D

04/25/2011

Electronic Signature of Signing Officer or Director

_____ Date