

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007615

FILED
May 02, 2005
Secretary of State

Entity Name: MT. ZION APOSTOLIC HOLINESS TEMPLE, INC.

Current Principal Place of Business:

5522 WISHING STAR LANE
GREENACRES, FL 33463

New Principal Place of Business:

Current Mailing Address:

5522 WISHING STAR LANE
GREENACRES, FL 33463

New Mailing Address:

FEI Number: 65-1055346 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WASHINGTON, VICK G P
1704 WHARF LANE
GREENACRES, FL 33463 US

Name and Address of New Registered Agent:

WASHINGTON, VICK G P
5522 WISHING STAR LANE
GREENACRES, FL 33463 US

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: VICK WASHINGTON

05/02/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: WASHINGTON, VICK G P/D/C
Address: 5522 WISHING STAR LANE
City-St-Zip: GREENACRES, FL 33463

Title: V/D () Delete
Name: WASHINGTON, KNADIA K V/D/S/T
Address: 5522 WISHING STAR LANE
City-St-Zip: GREENACRES, FL 33463

Title: D () Delete
Name: SCOTT, SHARON A D
Address: 9086 INDIAN RIVER RUN
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
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 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: KNADIA WASHINGTON

VP

05/02/2005

Electronic Signature of Signing Officer or Director

Date