

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90703 037 ****61.25

DOCUMENT # N01000004459

1. Entity Name

ZION FELLOWSHIP BAPTIST CHURCH, INC.



Principal Place of Business

4690 LIPSCOMB ST.
4-B
PALM BAY FL 32905

Mailing Address

4960 LIPSCOMB ST
4-B
PALM BAY FL 32905

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3550954

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WHITE, GEORGE H
4690 LIPSCOMB ST.
PALM BAY FL 32905

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
WHITE, GEORGE H
2535 WASHINGTON ST.
MELBOURNE FL 32901 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
WHITE, LAKEBA K
146 RACHEL ST., APT. #1
MELBOURNE FL 32901 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
BATTLE, CORETTA H
841 GILLEN AVE.
PALM BAY FL 32907 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
WHITE, MARY C
2535 WASHINGTON ST.
MELBOURNE FL 32901 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
WILLIAMS, ELLISTON
1245 PALM BAY RD., APT. 101
PALM BAY FL 32905 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
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CITY - ST - ZIP ☐ Change ☐ Addition

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CITY - ST - ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *George H. White* George H. White

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(321)
4-28-04-723-2848