## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000006884

FILED Apr 29, 2005 Secretary of State

Entity Name: NEW MOUNT ZION MISSIONARY BAPTIST CHURCH OF DAYTONA BEACH, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

515 DR. MARY MCLEOD BETHUNE BOULEVARD DAYTONA BEACH, FL 32114

Current Mailing Address: New Mailing Address:

515 DR. MARY MCLEOD BETHUNE BOULEVARD P.O. BOX 863

DAYTONA BEACH, FL 32114 DAYTONA BEACH, FL 32115

FEI Number: 59-2395487 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

COMBS, BARBARA H
23 DARTMOUTH TRACE
0RMOND BEACH, FL 32174 US
HAWKINS, BETTYE J
835 NORTH KOTTLE CIRCLE
DAYTONA BEACH, FL 32114 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: BETTYE J. HAWKINS 04/29/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

in the State of Florida.

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: T ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 COOK, ERNEST C SR
 Name:
 COOK, ERNEST C SR

 Address:
 160 BIG BEND DRIVE
 Address:
 160 BIG BEND DRIVE

 City-St-Zip:
 DAYTONA BEACH, FL 32114
 City-St-Zip:
 DAYTONA BEACH, FL 32114

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 STEVENS, JOHN
 Name:

 Address:
 314 N SENECA DR
 Address:

 City-St-Zip:
 DAYTINA BEACH, FL 32114
 City-St-Zip:

Title: T (X) Delete Title: ( ) Change ( ) Addition

 Name:
 HAWKINS, BETTY J
 Name:

 Address:
 835 KOTTLE CIRCLE
 Address:

 City-St-Zip:
 DAYTONA BEACH, FL 32114
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

Name:HARDING, MARTHA JName:Address:723 WINCHESTERAddress:City-St-Zip:DAYTONA BEACH, FL 32114 USCity-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: JOHN STEVENS DIR. 04/29/2005