

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

FILED
Mar 18, 2004 8:00 am
Secretary of State

03-18-2004 90022 003 ****61.25

DOCUMENT # N01000008738

1. Entity Name

NEW ZION MISSIONARY BAPTIST CHURCH, INC.



Principal Place of Business

**556 LINCOLN DR.
CHATTAHOOCHEE FL 32324**

Mailing Address

**P. O. BOX 815
CHATTAHOOCHEE FL 32324**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

MOORE

CR2E037 (11/03)

4. FEI Number

04-3695263

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

**MCCORMICK, MICHAEL K
38 DECATUR ST.
CHATTAHOOCHEE FL 32324**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T/D
HOLMES, SYLVESTER TREASUR
402 EAST LINCOLN DRIVE
CHATTAHOOCHEE FL 32324 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President T/D
Atkins, James
34 Shepard Street
Chattahoochee, FL 32324 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P/D
WADDELL, O.. W PRES.
4372 WADDELL LANE
MARIANNA FL 32446 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V.P. Treasura Director
Holmes, Sylvester
402 East Lincoln Drive
Chattahoochee, FL 32324 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP/D
ATKINS, JAMES V.P.
34 SHEPARD STREET
CHATTAHOOCHEE FL 32324 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Sec. 1 D
Marion Bright
Glenmack Crawford Street
Chattahoochee, FL 32324 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S/D
BATES, FRANCES SEC.
PO BOX 151
CHATTAHOOCHEE FL 32324 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
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☐ Delete

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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:

James Atkins Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/8/04