## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000001318

Entity Name: MT. ZION LIFE CENTER, INC.

FILED Feb 17, 2010 Secretary of State

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

449 SO. DR. MLK JR. BLVD. DAYTONA BCH, FL 32114

Current Mailing Address: New Mailing Address:

449 SO. DR. MLK JR. BLVD. DAYTONA BCH, FL 32114

FEI Number: 59-3483109 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LASSITER, WALTER J REV
449 SO. DR. MLK JR. BLVD.
DAYTONA BCH, FL 32114 US

CONNELLY, DAVID L REV
449 SO. DR. MLK JR. BLVD.
DAYTONA BCH, FL 32114 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: JOAN JOHNSON 02/17/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: [

Name: CONNELLY, DAVID L REV Address: 449 SO. DR. MLK JR. BLVD. City-St-Zip: DAYTONA BCH, FL 32114

Title: D

 Name:
 NELSON, HARRIETTE

 Address:
 1200 BEVILLE ROAD APT 36

 City-St-Zip:
 DAYTONA BCH, FL 32114

Title:

 Name:
 CRUSE, TOM

 Address:
 601 MADISON AVE

 City-St-Zip:
 DAYTONA BCH, FL 32114

Title: S

 Name:
 JOHNSON, JOAN

 Address:
 244 N KEECH STREET

 City-St-Zip:
 DAYTONA BEAH, FL 32114

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: JOAN JOHNSON SEC 02/17/2010