

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005791

FILED
Mar 29, 2009
Secretary of State

Entity Name: ROAD TO ZION, INC.

Current Principal Place of Business:

8001 EASTWOOD LANE
PENSACOLA, FL 32514

New Principal Place of Business:

Current Mailing Address:

8001 EASTWOOD LANE
PENSACOLA, FL 32514

New Mailing Address:

FEI Number: 54-2064796

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DORRIS, DAVID M
8001 EASTWOOD LANE
PENSACOLA, FL 32514 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DORRIS, DAVID M
Address: 8001 EASTWOOD LANE
City-St-Zip: PENSACOLA, FL 32514

Title: D () Delete
Name: DORRIS, WANDA J
Address: 8001 EASTWOOD LANE
City-St-Zip: PENSACOLA, FL 32514

Title: D () Delete
Name: GRATZ, SHLOMIT
Address: 25/7 BETAR ST
City-St-Zip: JERUSALEM, FL 910001 IS

Title: D () Delete
Name: MONTGOMERY, SAUL
Address: EMEK HAHULA 10/5
City-St-Zip: MODIIN 71700 ISRAEL,

Title: D () Delete
Name: HALL, LAVOY
Address: 8386 TABAID PL
City-St-Zip: PENSACOLA, FL 32506

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:

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 exemption stated in Chapter 119, 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: DAVID M. DORRIS

D

03/29/2009

Electronic Signature of Signing Officer or Director

Date