

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002393

Entity Name: DAUGHTER OF ZION MINISTRIES, INC.

FILED
May 01, 2004
Secretary of State

Current Principal Place of Business:

5837 SE 126TH STREET
BELLEVIEW, FL 34420

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 155
SUMMERFIELD, FL 34492

New Mailing Address:

5837 SE 126TH STREET
BELLEVIEW, FL 34420

FEI Number: 03-0512387

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BETTY E. GOOLSBY
5837 SE 126TH STREET
BELLEVIEW, FL 34420

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: FINCHER, RHONDA
Address: 864 NE 77TH STREET
City-St-Zip: OCALA, FL 34479

Title: D () Delete
Name: GOOLSBY, RICHARD H
Address: 5837 SE 126TH STREET
City-St-Zip: BELLEVIEW, FL 34420

Title: D () Delete
Name: GOOLSBY, BETTY E
Address: 5837 SE 126TH STREET
City-St-Zip: BELLEVIEW, FL 34420

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GOOLSBY, BETTY
Address: 5837 SE 126TH STREET
City-St-Zip: BELLEVIEW, FL 34420

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: FINCHER, RHONDA
Address: 864 NE 77TH STREET
City-St-Zip: OCALA, FL 34479

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: BETTY GOOLSBY

D

05/01/2004

Electronic Signature of Signing Officer or Director

Date