


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

8/17/2007-90031-00455125-SC125
8 **FILED**

2007 OCT 11 PM 2:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N03000006610			
1. Entity Name MT. ZION CHRISTIAN CHURCH (DISCIPLES OF CHRIST) INC. <i>N03000006640</i>			
Principal Place of Business 4030 15TH AVE S ST. PETERSBURG FL 33711		Mailing Address 4030 15TH AVE S ST. PETERSBURG FL 33711	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
State, Apt. #, etc.		State, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-2977067		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FREENEY-LAVONIA 40904 15TH AVENUE SOUTH ST. PETERSBURG FL 33711 <i>Brown, CILLA 2901 Ivanhoe Way So. 33705</i>		7. Name and Address of New Registered Agent Name <i>Cilla Brown</i> Street Address (P.O. Box Number is Not Acceptable) <i>2901 Ivanhoe Way So</i> City <i>St. Pete</i> FL Zip Code <i>33705</i>	
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 <i>Cilla Brown (Treasurer + Trustee)</i> 8-28-07 <small>Digitally signed by Cilla Brown, DN: cn=Cilla Brown, o=MT. ZION CHRISTIAN CHURCH (DISCIPLES OF CHRIST) INC., email=Cilla.Brown@mtzion.org, c=US</small> (NOTE: Registered Agents signature required when re-registering) DATE			
FILE NOW: FEE IS \$81.25 Due By September 5, 2007		9. Election Campaign Financing - Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	C BROWN, CILLA <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, CILLA	NAME	
STREET ADDRESS	2901 IVANHOE WAY SA 2901 Ivanhoe Way So.	STREET ADDRESS	
CITY-STATE-ZIP	ST. PETERSBURG FL 33705	CITY-STATE-ZIP	
TITLE	D WHITEHEAD, ALVIS <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHITEHEAD, ALVIS N/A	NAME	
STREET ADDRESS	861 57ST AVE 50	STREET ADDRESS	
CITY-STATE-ZIP	ST. PETERSBURG FL 33712	CITY-STATE-ZIP	
TITLE	D Willie Davis <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Willie Davis	NAME	
STREET ADDRESS	4601 11 ave so.	STREET ADDRESS	
CITY-STATE-ZIP	St. Petersburg Fla. 33711	CITY-STATE-ZIP	
TITLE	-D Albert C. Witchard <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Albert C. Witchard	NAME	
STREET ADDRESS	220 49th St. No.	STREET ADDRESS	
CITY-STATE-ZIP	St. Petersburg, Fla. 33710	CITY-STATE-ZIP	
TITLE	D Carrie Cainion <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Carrie Cainion	NAME	
STREET ADDRESS	4665 19th ave so.	STREET ADDRESS	
CITY-STATE-ZIP	St. Petersburg, Fla. 33711	CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-STATE-ZIP		CITY-STATE-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Cilla Brown</i>		8-28-07	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	

[Handwritten Signature]



MT. ZION CHRISTIAN CHURCH (DISCIPLES OF CHRIST)

Pastor O. B. Smith
4030 15th Avenue South
St. Petersburg, FL 33711

Cilla Brown (Church Treasurer & Church Trustee)

Willie Davis (Church Trustee)

Albert C. Witchard (Church Trustee)

Carrie Cainion (Church Secretary)