

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 02, 2009  
Secretary of State**

DOCUMENT# N03000006640

Entity Name: MT. ZION CHRISTIAN CHURCH (DISCIPLES OF CHRIST) INC.

**Current Principal Place of Business:**

4030 15TH AVE S  
ST. PETERSBURG, FL 33711

**New Principal Place of Business:**

4030 15TH AVE S  
ST. PETERSBURG, FL 33711 US

**Current Mailing Address:**

4030 15TH AVE S  
ST. PETERSBURG, FL 33711

**New Mailing Address:**

4030 15TH AVE S  
ST. PETERSBURG, FL 33711 US

FEI Number: 59-2977067      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BROWN, CILLA  
2901 IVANHOE WAY SO  
ST. PETERSBURG, FL 33705 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: TT ( ) Delete  
Name: BROWN, CILLA  
Address: 2901 CANHOE WAY SO  
City-St-Zip: ST. PETERSBURG, FL 33705

Title: T ( ) Delete  
Name: DAVIS, WILLIE  
Address: 4601 11 AVENUE SO  
City-St-Zip: ST PETERSBURG, FL 33711

Title: T (X) Delete  
Name: WITCHARD, ALBERT C  
Address: 220 49TH ST NO  
City-St-Zip: ST PETERSBURG, FL 33710

Title: S (X) Delete  
Name: HUGHES, SHAMEKA  
Address: 3738 15TH AVE S  
City-St-Zip: SAINT PETERSBURG, FL 33711

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: TT (X) Change ( ) Addition  
Name: BROWN, CILLA  
Address: 2901 IVANHOE WAY SO  
City-St-Zip: ST. PETERSBURG, FL 33705

Title: CC (X) Change ( ) Addition  
Name: GRIFFIN, DELPHINE  
Address: 316 MADISON STREET SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33711 US

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: DELPHINE GRIFFIN

CC

02/02/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date