

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008976

FILED
Sep 02, 2009
Secretary of State

Entity Name: ZION HILL MISSIONARY BAPTIST CHURCH OF SEBRING, FL., INC.

Current Principal Place of Business:

301 MARTIN LUTHER KING BLVD
SEBRING, FL 33870

New Principal Place of Business:

Current Mailing Address:

PO BOX 211
SEBRING, FL 33871

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ABLES, CLIFFORD M III
551 SOUTH COMMERCE AVENUE
SEBRING, FL 338703869 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DST () Delete
Name: STRINGER, ANDREW
Address: 219 FLORIDA DRIVE
City-St-Zip: SEBRING, FL 33870

Title: CD () Delete
Name: POUGH, LEVI JR
Address: 1118 LEMON AVENUE
City-St-Zip: SEBRING, FL 33870

Title: DT () Delete
Name: CLARKE, WELLINGTON E
Address: 4615 HIGH AVE
City-St-Zip: SEBRING, FL 33870

Title: DTT () Delete
Name: STEPHENS, JAMES ANDREW
Address: 101 FLORIDA DRIVE
City-St-Zip: SEBRING, FL 33870

Title: DT () Delete
Name: WILLIAMSON, DONALD R
Address: 909 BOKER STREET
City-St-Zip: SEBRING, FL 33870

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: ANDREW STRINGER

DST

09/02/2009

Electronic Signature of Signing Officer or Director

Date