2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 08, 2007
Secretary of State

DOCUMENT# N03000009749

Entity Name: MT. ZURA FULL GOSPEL BAPTIST CHURCH INCORPORATED

Current Principal Place of Business:

25225 NW 2ND AVE.
NEWBERRY, FL 32669

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1517
NEWBERRY, FL 32669

New Mailing Address:

FEI Number: 59-3665096 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PARKER, JENNIE N
19006 SW 79TH AVE
ARCHER, FL 32618 US

Name and Address of New Registered Agent:

CURTIS, NATRON A
14326 NW 158 AVE
ALACHUA, FL 32616 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: NATRON A. CURTIS 10/08/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: T ( ) Delete
Name: PARKER, JENNIE N
Address: 19006 SW 79TH AVE
City-St-Zip: ARCHER, FL 32618

Title: T ( ) Delete
Name: KING, DONALD J
Address: 3127 NW 75TH WAY
City-St-Zip: GAINESVILLE, FL 32606

Title: T ( ) Delete
Name: FISHER, RALEIGH D
Address: 1319 8 S.W. 12TH PLACE
City-St-Zip: NEWBERRY, FL 32669

Title: T ( ) Delete
Name: DURR, CATHERINE
Address: 14130 SW 12TH PL
City-St-Zip: NEWBERRY, FL 32669

Title: T ( ) Delete
Name: HUGHES, JAME
Address: 2911 NE 11 TR
City-St-Zip: GAINESVILLE, FL 32609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition
Name: CURTIS, NATRON A
Address: 14326 NW 158 AVE
City-St-Zip: ALACHUA, FL 32616

Title: T (X) Change ( ) Addition
Name: WATSON, GAIL K
Address: 25055 NW 7TH AVE
City-St-Zip: NEWBERRY, FL 32669

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: NATRON A. CURTIS T 10/08/2007
Electronic Signature of Signing Officer or Director Date