

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 27, 2006
Secretary of State**

DOCUMENT# N04000006848

Entity Name: NEW MOUNT ZION BUS MINISTRY, INC.

Current Principal Place of Business:

2511 EAST COLUMBUS DRIVE
TAMPA, FL 33605

New Principal Place of Business:

Current Mailing Address:

2511 EAST COLUMBUS DRIVE
TAMPA, FL 33605

New Mailing Address:

FEI Number: 01-0817616 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEWIS, DAVID
2511 EAST COLUMBUS DRIVE
TAMPA, FL 33605 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: D () Delete
Name: FORT, CLARENCE
Address: 4907 84TH STREET
City-St-Zip: TAMPA, FL 33619

Title: D () Delete
Name: LOVETT, JOHN C
Address: 1510 SAKONNETT COURT
City-St-Zip: BRANDON, FL 33511

Title: D () Delete
Name: LEWIS, DAVID
Address: 2511 COLUMBUS DRIVE
City-St-Zip: TAMPA, FL 33605

Title: D () Delete
Name: WASHINGTON, BOOKER T
Address: 4416 JOHN BELL DRIVE
City-St-Zip: TAMPA, FL 33610

Title: () Delete
Name:
Address:
City-St-Zip:

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: SEC () Change (X) Addition
Name: WILSON, YVONNE
Address: 3810 E NORFOLK STREET
City-St-Zip: TAMPA, FL 33604

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID LEWIS

D

02/27/2006

Electronic Signature of Signing Officer or Director

_____ Date