2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2009
Secretary of State

DOCUMENT# N04000007983

Entity Name: MOUNT ZION PRIMITIVE BAPTIST CHURCH FOUNDATION, INC.

Current Principal Place of Business:

3469 PACES FERRY ROAD
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

3469 PACES FERRY ROAD
TALLAHASSEE, FL 32309

New Mailing Address:

FEI Number: 76-0812202 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TELLIS, YVETTE L
3469 PACES FERRY ROAD
TALLAHASSEE, FL 32309 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: TELLIS, YVETTE
Address: 3469 PACES FERRY ROAD
City-St-Zip: TALLAHASSEE, FL 32309

Title: T ( ) Delete
Name: SMITH, ANNIE
Address: 205 1/2 BERMUDA ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: D ( ) Delete
Name: SESSION, TONYA
Address: 205 1/2 BERMUDA ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: D ( ) Delete
Name: JOHNSON, CAROL J
Address: 4559 PEMBERTON ROAD
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete
Name: HENDERSON, PRISCILLA
Address: 2104-B ADMIRAL COURT
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete
Name: JOHNSON, DARRELL II
Address: 1064 KINGDOM DRIVE
City-St-Zip: TALLAHASSEE, FL 32311

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:

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: YVETTE L. TELLIS D 03/04/2009

Electronic Signature of Signing Officer or Director — Date