2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001922

FILED Apr 09, 2009 Secretary of State

Entity Name: THE MT. ZION MISSIONARY BAPTIST CHURCH, INC OF FT. PIERCE, FLORIDA

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1720 N. 19 FT. PIERC	TH ST E, FL 34950				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	11TH STREET ILL, FL 33313	Г			
FEI Number:	83-0421065	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address of	f New Registered Agent:	
4380 N.W.	S, MATTHEW 11TH STREET IILL, FL 33313				
	named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
OFFICERS					
	S AND DIREC	rors:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:		Delete ISE M Y AVENUE	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip:		
Title: Name: Address:	D () JOHNSON, LOU 3206 KENTUCK FT PIERCE, FL	Delete ISE M Y AVENUE 34947 Delete TTHEW J SR I STREET	Title: Name: Address:	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip: Title: Name: Address:	D () JOHNSON, LOU 3206 KENTUCK FT PIERCE, FL D () MEADOWS, MA 4380 N.W. 11TH LAUDERHILL, F	Delete IISE M Y AVENUE 34947 Delete TTHEW J SR I STREET L 33313 Delete LICIA Y I COURT	Title: Name: Address: City-St-Zip: Title: Name: Address:	ES TO OFFICERS AND DIRECTORS: () Change () Addition	

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: MATTHEW J. MEADOWS , SR. D 04/09/2009