

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002586

FILED  
Mar 15, 2011  
Secretary of State

**Entity Name:** NEW MOUNT ZION HOLINESS CHURCH #2 INC.

**Current Principal Place of Business:**

1004 SE 10TH AVE.  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

**Current Mailing Address:**

1004 SE 10TH AVE.  
GAINESVILLE, FL 32601

**New Mailing Address:**

FEI Number: 73-1714224

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TYSON, BARBARA  
1004 SE 10TH AVE.  
GAINESVILLE, FL 32601 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: P  
Name: TYSON, BARBARA  
Address: 1004 SE 10TH AVE.  
City-St-Zip: GAINESVILLE, FL 32601

Title: P  
Name: FERGUSON, BERNETHEL  
Address: 1755 W. 42ND  
City-St-Zip: JACKSONVILLE, FL 32209

Title: P  
Name: WALKER, YVONNE  
Address: 1633 KEATS RD.  
City-St-Zip: JACKSONVILLE, FL 32208

Title: P  
Name: WILSON, JOSEPH H  
Address: 8203 NW 31ST AVE., APT. B8  
City-St-Zip: JACKSONVILLE, FL 32606

Title: D  
Name: ALSTON, INEZ H  
Address: 2401 NE 70TH ST.  
City-St-Zip: GAINESVILLE, FL 32609

I hereby 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 all other like empowered.

SIGNATURE: PASTOR BARBARA TYSON

P

03/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date