## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N06000001814

FILED Dec 22, 2009 Secretary of State

Entity Name: MT. ZION CHRISTIAN METHODIST EPISCOPAL CHURCH, INC.

Current Principal Place of Business:

New Principal Place of Business:

232 HAL MCRAE BLVD AVON PARK, FL 33825

Current Mailing Address: New Mailing Address:

P.O. BOX 952 AVON PARK, FL 338250952

FEI Number: 65-0436473 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

SIMMONS, BONNIE SIMMONS, BONNIE R
2140 N BARCLAY RD
AVON PARK, FL 33825 US SIMMONS, BONNIE R
2140 N BARCLAY RD
AVON PARK, FL 33825 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: BONNIE R. SIMMONS 12/22/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 FLEMING, ERNEST
 Name:

 Address:
 205 JOE HILTON ST
 Address:

 City-St-Zip:
 AVON PARK, FL 33825
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WILLIAMS, MICHELLE
 Name:

 Address:
 29 PALM CIRCLE
 Address:

 City-St-Zip:
 AVON PARK, FL 33825
 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: BONNIE R. SIMMONS SEC. 12/22/2009