## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000000026

Entity Name: ZION MINISTRIES C.A., INC.

FILED Jan 08, 2010 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

**4417 13TH STREET** SUITE 207 ST. CLOUD, FL 34769

**New Mailing Address: Current Mailing Address:** 

**4417 13TH STREET** SUITE 207 ST. CLOUD, FL 34769

FEI Number: 41-2228579 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SWART BAUMRUK & COMPANY, LLP SWYERS, JOHN 1101 MIRANDA LANE 1643 MARINA LAKE DRIVE KISSIMMEE, FL 34741 KISSIMMEE, FL 34744 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.

01/08/2010 SIGNATURE: JOHN SWYERS

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

JURKA, PETER J Name: Address: 38 GIBLIN DRIVE City-St-Zip: WEST SENECA, NY 14224

Title:

Name: SWYERS, JOHN Address: 1643 MARINA LAKE DRIVE City-St-Zip: KISSIMMEE, FL 34744

Title:

BESCH, DAVID Name: Address: 121 WILMUTH AVE City-St-Zip: LACKAWANNA, NY 14218

Title:

Name: CARRETTE, JOHN

4417 13TH STREET, SUITE 207 Address:

City-St-Zip: ST. CLOUD, FL 34769

Title:

Name: JURKA, TYANNE

4417 13TH STREET, SUITE 207 Address:

ST. CLOUD, FL 34769 City-St-Zip:

Title:

JURKA, JOSHUA Name:

Address: 4417 13TH STREET, SUITE 207 ST. CLOUD, FL 34769 City-St-Zip:

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.

**PRES** SIGNATURE: PETER J. JURKA 01/08/2010