

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003098

FILED  
Jan 08, 2010  
Secretary of State

**Entity Name:** NEW MOUNT ZION LUNDY BAPTIST CHURCH INC

**Current Principal Place of Business:**

2401 LUNDY ROAD  
PALATKA, FL 32177 US

**New Principal Place of Business:**

**Current Mailing Address:**

2401 LUNDY ROAD  
PALATKA, FL 32177 US

**New Mailing Address:**

FEI Number: 59-3237087

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

VICKERS, JAMES E.  
2605 HUSSON AVENUE  
PALATKA, FL 322177 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: VICKERS, JAMES EDWARD  
Address: 2605 HUSSON AVENUE  
City-St-Zip: PALATKA, FL 32177 US

Title: D  
Name: KEARNEY, ELWORTH  
Address: 2403 LUNDY ROAD  
City-St-Zip: PALATKA, FL 32177 US

Title: S  
Name: JOHNS, HELEN  
Address: 1223 REID STREET  
City-St-Zip: PALATKA, FL 32177 US

Title: D  
Name: BROWN, SHALANDRA  
Address: 1116 MOSELEY AVENUE  
City-St-Zip: PALATKA, FL 32177 US

Title: VP  
Name: HOWELL, JAMES  
Address: 818 NORTH 10TH STREET  
City-St-Zip: PALATKA, FL 32177 US

Title: D  
Name: ELLIS, CARL  
Address: PENIEL ROAD  
City-St-Zip: PALATKA, FL 32177 US

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: JAMES E. VICKERS

P

01/08/2010

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

\_\_\_\_\_  
Date