2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N11138

1. Entity Name
ZION CHURCH OF GOD OF FLORIDA CITY, INC.

Principal Place of Business	Mailing Address
1055 REDLAND RD. FLORIDA CITY, FL 33034	REV WELLINGTON FERGUSON 10370 SW 182 ST MIAMI, FL 33157

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

02022005   Chg-NP   CR2E037 (10/03)

4. FEI Number 59-2600621	Applied For Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FERGUSON, WELLINGTON SR 10370 SW 182 ST MIAMI, FL 33157	Name Street Address (P.O. Box Number is Not Acceptable) City ___ FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $61.25 **Due by May 1, 2005**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	**Make check payable to** **Florida Department of State**

10.	OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	CD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	FERGUSON, WELLINGTON SR		NAME		U00000230299
STREET ADDRESS	10370 SW 182 ST		STREET ADDRESS		02/15/05-80038-003 70.00
CITY-ST-ZIP	MIAMI, FL		CITY-ST-ZIP		
TITLE	TD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	FERGUSON, MABLE D		NAME		
STREET ADDRESS	10370 SW 182 ST		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	MALLETT, CHESTER		NAME		
STREET ADDRESS	449 S.W. 11TH AVE		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33030		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	FRONDA, FORE E		NAME		
STREET ADDRESS	10465 SW 173 TERR		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33157		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	FLAGLER, HERMAN SR.		NAME		
STREET ADDRESS	20300 S.W. 114 PL		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33129		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Rev. Wellington Ferguson Sr._   _2/10/05_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #