

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2009
Secretary of State

DOCUMENT# N17603

Entity Name: NEW MOUNT ZION AFRICAN METHODIST EPISCOPAL CHURCH, LAKE HAMILTON, FL., INC.

Current Principal Place of Business:

530 KOKOMO ROAD
LAKE HOMILTON, FL 33851

New Principal Place of Business:

530 KOKOMO ROAD
LAKE HAMILTON, FL 33851

Current Mailing Address:

P.O. BOX 288
LAKE HAMILTON, FL 33851

New Mailing Address:

FEI Number: 14-1918972 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HAYES, WILLIE J REV
1096 W. CLOWER ST.
BARTOW, FL 33831 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: S () Delete
Name: JACKSON, JOHN D SR
Address: 9 TANGELO DR
City-St-Zip: LAKE HAMILTON, FL

Title: TR () Delete
Name: ROBERSON, WALTER
Address: 1009 CHURCH ST
City-St-Zip: LAKE HAMILTON, FL 33851

Title: S () Delete
Name: MINCEY, DOROTHY M
Address: 509 PEARL ST
City-St-Zip: LAKE HAMILTON, FL 33851

Title: S () Delete
Name: HAYES, DARLEEN
Address: 9 TANGELO DR
City-St-Zip: LAKE HAMILTON, FL

Title: TR () Delete
Name: JACKSON, JESSIE
Address: 9 TANGELO DR
City-St-Zip: LAKE HAMILTON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STEW (X) Change () Addition
Name: JACKSON, JOHN D SR
Address: 9 TANGERINE DR.
City-St-Zip: HAINES CITY, FL 33844 US

Title: TRUS (X) Change () Addition
Name: ROBERSON, WALTER
Address: 1009 CHURCH ST
City-St-Zip: LAKE HAMILTON, FL 33851 US

Title: SECR (X) Change () Addition
Name: MINCEY, DOROTHY M
Address: 509 PEARL ST
City-St-Zip: LAKE HAMILTON, FL 33851 US

Title: STEW (X) Change () Addition
Name: JACKSON, RODERICK D
Address: 9 TANGERINE DR
City-St-Zip: HAINES CITY, FL 33844 US

Title: TREA (X) Change () Addition
Name: JACKSON, JESSIE M
Address: 9 TANGERINE DR
City-St-Zip: HAINES CITY, FL 33844 US

Title: TRUS () Change (X) Addition
Name: SMITH, BERNICE C
Address: 1050 DETOUR ROAD
City-St-Zip: HAINES CITY, FL 33844 US

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: DOROTHY MINCEY

SECR

02/12/2009

Electronic Signature of Signing Officer or Director

Date