2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21399

FILED Feb 23, 2007 Secretary of State

Entity Name: NEW JERUSALEM MT. ZION HOLINESS CHURCH OF GOD IN CHRIST BY FAITH, OF NORTH

CENTRAL FLORIDA, INC.

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

701 49 ST. S.

GULFPORT, FL 33707 US

Current Mailing Address: New Mailing Address:

745 41 ST. N

SAINT PETERSBURG, FL 33713 US

FEI Number: 59-3098777 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:

MORRISON, CLAIRE
1102 60ST S

MORRISON, CLAIRE
745 41 STREET NORTH

ST.PETERSBURG, FL 33707 US ST.PETERSBURG, FL 33713 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: CLAIRE MORRISON 02/23/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: ATD () Delete Title: DIRE (X) Change () Addition

 Name:
 MORRISON, CLAIRE
 Name:
 MORRISON, CLAIRE

 Address:
 745 41ST STREET N
 Address:
 745 41ST STREET N

City-St-Zip: SAINT PETERSBURG, FL 33713 City-St-Zip: SAINT PETERSBURG, FL 33713

 Name:
 MORRISON, ANNA
 Name:
 KALB, FERN SEC.

 Address:
 1102 60TH STREET S
 Address:
 4901 8 TH AVE SOUTH

City-St-Zip: SAINT PETERSBURG, FL 33707 City-St-Zip: SAINT PETERSBURG, FL 33707

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf (X) \ Delete} \qquad \qquad {\sf Title:} \qquad {\sf (\) \ Change \ (\) \ Addition}$

 Name:
 MORRISON, BRIAN
 Name:

 Address:
 1102 60TH STREET S
 Address:

 City-St-Zip:
 SAINT PETERSBURG, FL 33707
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CLAIRE MORRISON DIRE 02/23/2007

Electronic Signature of Signing Officer or Director

Date