

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30917

FILED
Aug 09, 2009
Secretary of State

Entity Name: ZION MINISTRIES, INC.

Current Principal Place of Business:

12413 TWO TRAIL ROAD
FOUNTAIN, FL 32438 US

New Principal Place of Business:

Current Mailing Address:

12413 TWO TRAIL ROAD
FOUNTAIN, FL 32438 US

New Mailing Address:

FEI Number: 59-2936099 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SANSOM, JAMES L.
12413 TWO TRAIL ROAD
FOUNTAIN, FL 32438 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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SANSOM, JAMES L.
Address: 12413 TWO TRAIL RD
City-St-Zip: FOUNTAIN, FL 32438

Title: VD () Delete
Name: BUSH, OLIVER
Address: 3001 DOUGLAS FERRY RD
City-St-Zip: BONIFAY, FL 32425

Title: STD () Delete
Name: SANSOM, SANDRA E.
Address: 12413 TWO TRAIL RD
City-St-Zip: FOUNTAIN, FL 32438

Title: D () Delete
Name: BUSH, TERRY D
Address: 5521 ARNOLD RD
City-St-Zip: PANAMA CITY, FL 32404

Title: D () Delete
Name: MASTER, BRETT A
Address: 12031 OWENWOOD RD
City-St-Zip: FOUNTAIN, FL 32438

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: REV. JAMES L. SANSOM

PD

08/09/2009

Electronic Signature of Signing Officer or Director

_____ Date