

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2007 8:00 am
Secretary of State

02-09-2007 90020 002 ****61.25

DOCUMENT # N35705

1. Entity Name
GREATER ZION GROVE BAPTIST CHURCH, INC.



Principal Place of Business
**6345 118TH ST
JACKSONVILLE, FL 32244**

Mailing Address
**6345 118TH ST
JACKSONVILLE, FL 32244**

40012549



2. Principal Place of Business - No P.O. Box #

6345 118TH STREET

Suite, Apt. #, etc.
JACKSONVILLE FL 32244

City & State

3. Mailing Address

6345 118TH STREET

Suite, Apt. #, etc.

JACKSONVILLE FLORIDA 32244

City & State

01122007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3173074

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**TUCKER, PASTOR WILLIE O
7871 118TH STREET
JACKSONVILLE, FL 32244**

7. Name and Address of New Registered Agent

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, 2007**

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

TITLE VC ☐ Delete
NAME PATTON, WILLIE
STREET ADDRESS 1303 RED MAPLE COURT
CITY-ST-ZIP ORANGE PARK, FL 32073

TITLE D ☐ Delete
NAME PRICE, BENNY
STREET ADDRESS 5911 JOHN F KENNEDY DR N
CITY-ST-ZIP JACKSONVILLE, FL 32219

TITLE TD ☐ Delete
NAME TUCKER, WILLIE O
STREET ADDRESS 7871 118TH ST
CITY-ST-ZIP JACKSONVILLE, FL 32244

TITLE D ☐ Delete
NAME HICKS, JIMMIE P
STREET ADDRESS 13407 ASHCROFT LANDING COURT
CITY-ST-ZIP JACKSONVILLE, FL 32225

TITLE D ☐ Delete
NAME ODOM, JACKIE
STREET ADDRESS 6149 TURKNETT ROAD
CITY-ST-ZIP JACKSONVILLE, FL 32244

TITLE D ☐ Delete
NAME CULVER, CLARENCE
STREET ADDRESS 981 COBBLESTONE DR
CITY-ST-ZIP ORANGE PARK, FL 32065

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-4-07