

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41396

FILED  
Mar 03, 2009  
Secretary of State

**Entity Name:** MOUNT ZION AFRICAN METHODIST EPISCOPAL CHURCH, INC., OF MULBERRY, FLORIDA

**Current Principal Place of Business:**

117 S.W. 4TH AVENUE  
MULBERRY, FL 338603036

**New Principal Place of Business:**

**Current Mailing Address:**

117 S.W. 4TH AVENUE  
MULBERRY, FL 338603036

**New Mailing Address:**

**FEI Number:** 59-2561250

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

STALLWORTH, RAYMOND C  
117 SW 4TH AVE  
MULBERRY, FL 33860 US

**Name and Address of New Registered Agent:**

SMITH, OCTAVIUS L  
117 SW 4TH AVE  
MULBERRY, FL 33860 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: OCTAVIUS L. SMITH

03/03/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: REV ( ) Delete  
Name: STALLWORTH, RAYMOND C  
Address: 1140 MARKSTOWN LANE  
City-St-Zip: LAKELAND, FL 33811

Title: T ( ) Delete  
Name: SACHEL, FRANK R  
Address: 806 3RD ST., SE  
City-St-Zip: MULBERRY, FL 33860

Title: T ( ) Delete  
Name: BROWN, INEZ H  
Address: 217 6TH AVE., NW  
City-St-Zip: MULBERRY, FL 33860

Title: ST ( ) Delete  
Name: SACHEL, BRENDA B  
Address: 806 SE 3RD STREET  
City-St-Zip: MULBERRY, FL 33860

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: REV (X) Change ( ) Addition  
Name: SMITH, OCTAVIUS L  
Address: 117 SW 4TH AVENUE  
City-St-Zip: MULBERRY, FL 33860

Title: TRUS (X) Change ( ) Addition  
Name: SACHEL, FRANK R  
Address: 806 3RD ST., SE  
City-St-Zip: MULBERRY, FL 33860

Title: TRUS (X) Change ( ) Addition  
Name: BROWN, INEZ H  
Address: 217 4TH AVE., NW  
City-St-Zip: MULBERRY, FL 33860

Title: STEW (X) Change ( ) Addition  
Name: SACHEL, BRENDA B  
Address: 806 SE 3RD STREET  
City-St-Zip: MULBERRY, FL 33860

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: BRENDA B SACHEL

DR

03/03/2009

Electronic Signature of Signing Officer or Director

Date