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FILED
May 09 1997 8:00am
Secretary of State

NONPROFIT. CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N46744 (1)

1. Corporation Name

THE NEW JERUSALEM MOUNT ZION HOLINESS CHURCH OF GOD IN CHRIST BY FAITH AND OLD PEOPLE RESCUE AND

Principal Place of Business	Mailing Address
11434 N.W. 22ND AVENUE MIAMI FL 33167	11334 N.W. 22ND AVENUE P. O. BOX 680580 MIAMI FL 33168-0580 US

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 11434 NW 22nd Ave
22 City & State	27 P.O. Box 680580
23 Zip	28 Miami Florida
24 Country	29 33167
25	30 Dade

3. Date Incorporated or Qualified 01/06/1992	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0030219	Applied For Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes No

9. Name and Address of Current Registered Agent

WILSON, BISHOP JOHN W.
11334 N.W. 22ND AVENUE
MIAMI FL 33167

10. Name and Address of New Registered Agent

81 Name Bishop JOHN W. Wilson
82 Street Address (P.O. Box Number is Not Acceptable) 11434 NW 22nd Ave
83
84 City Miami FL 85 Zip Code 33167

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Bishop John W. Wilson* President JOHN W. Wilson 4-29-97
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE)

12. OFFICERS AND DIRECTORS

TITLE	PD	DELETE
NAME	WILSON, JOHN W	
STREET ADDRESS	11434 N.W. 22ND AVENUE	
CITY-ST-ZIP	MIAMI FL 33167	
TITLE	VSD	DELETE
NAME	WILSON, MAMIE	
STREET ADDRESS	1136 N.W. 22ND AVENUE	
CITY-ST-ZIP	MIAMI FL	
TITLE	TD	DELETE
NAME	WORTHAM, WALTER	
STREET ADDRESS	9050 N.W. 20TH AVE.	
CITY-ST-ZIP	MIAMI FL	
TITLE	TD	DELETE
NAME	MAMIE WILSON, YVONNE	
STREET ADDRESS	11336 NW 22ND AVE.	
CITY-ST-ZIP	MIAMI FL 33167	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	Change Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	Change Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	Change Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	Change Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	Change Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	Change Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an amendment with an address.

SIGNATURE *John W. Wilson* President JOHN W. Wilson 4-29-97 6936503 (305)

CR2E037 (9/96)