


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 12, 2008 8:00 am**  
**Secretary of State**

02-12-2008 90014 041 \*\*\*\*61.25

<b>DOCUMENT # N93000003074</b>			
1. Entity Name <b>NEW MOUNT ZION MISSIONARY BAPTIST CHURCH OF MELBOURNE, INC.</b>			
Principal Place of Business <b>624 E. WALLS STREET MELBOURNE FL 32901 US</b>		Mailing Address <b>P.O. BOX 512 MELBOURNE FL 32902 US</b>	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number <b>59-3202179</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>BLOUNT, PETER 271 NAYLOR ST. PALM BAY FL 32907</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____		DATE _____	
<small>Signature, typed or printed name of registered agent and title if applicable.</small>		<small>(NOTE: Registered Agent signature required when reinstating)</small>	



1st MOORE CR2E037 (10/07)

<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	<b>Make Check Payable to Florida Department of State</b>
--	--	------------------------------------	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>WILSON, T J DEC.</b> <b>3536 APPLIN WAY</b> <b>MELBOURNE FL 32901</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>RICHARDSON, BOISNUEF DEC.</b> <b>1304 CARR CIRCLE NE</b> <b>PALM BAY FL 32905</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>CHATTMAN, EARNESTINE</b> <b>608 E RYOLAND ST</b> <b>MELBOURNE FL 32901</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>CHATTMAN, AURTHOR</b> <b>653 MURSET AVE SE</b> <b>PALM BAY FL 32909</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Chattman, Auther</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>608 E Ryoland St</b> <b>Melbourne, FL 32901</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MASON, CHARLES</b> <b>606 MURSET AVE SE</b> <b>PALM BAY FL 32909</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BLOUNT, PETER</b> <b>271 NAHLOR ST.</b> <b>MELBOURNE FL 32901</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Blount, Peter</b> <b>271 Naylor St.</b> <b>Palm Bay, FL 32907</b>

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

**SIGNATURE:** *T.J. Wilson* *T.J. Wilson* **02/13/08** **321-724-4736**