

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003924

FILED
Mar 09, 2009
Secretary of State

Entity Name: NEW MT. ZION MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

1321 NORTH WEBSTER AVE.
LAKELAND, FL 33805

New Principal Place of Business:

Current Mailing Address:

1321 NORTH WEBSTER AVE.
LAKELAND, FL 33805

New Mailing Address:

POST OFFICE BOX 3738
LAKELAND, FL 33802

FEI Number: 59-2052386

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HARDIE, JOE S REV.
1641 YEOMANS PATH
LAKELAND, FL 33809 US

Name and Address of New Registered Agent:

MCLIN, L. B. MR.
1350 MARTIN LUTHER KING BLVD.
BARTOW, FL 33830 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: L. B. MCLIN

03/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HARDIE, REV. JOE S
Address: 1641 YEOMANS PATH
City-St-Zip: LAKELAND, FL 33809

Title: D () Delete
Name: BRODERICK, WEBSTER
Address: 1039 N. ANDERSON AVENUE
City-St-Zip: LAKELAND, FL 33805

Title: D () Delete
Name: AUSTIN, AMBROSE
Address: P.O. BOX 3096
City-St-Zip: LAKELAND, FL 33802

Title: D () Delete
Name: GATLIN, WILLIAM
Address: 1409 CANDYCE AVE
City-St-Zip: LAKELAND, FL 33805

Title: D (X) Delete
Name: KING, LAURASTINE
Address: 1018 MADISON AVE
City-St-Zip: LAKELAND, FL 33805

Title: D (X) Delete
Name: BOLDEN, MINNIE
Address: 1041 N ANDERSON AVE
City-St-Zip: LAKELAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCLIN, L.B. MR.
Address: 1350 MARTIN LUTHER KING BLVD.
City-St-Zip: BARTOW, FL 33830

Title: D (X) Change () Addition
Name: BRODERICK, WEBSTER MR.
Address: 1039 N. ANDERSON AVENUE
City-St-Zip: LAKELAND, FL 33805

Title: D (X) Change () Addition
Name: AUSTIN, AMBROSE MR.
Address: P.O. BOX 3096
City-St-Zip: LAKELAND, FL 33802

Title: D (X) Change () Addition
Name: GATLIN, WILLIAM MR.
Address: 1409 CANDYCE AVE
City-St-Zip: LAKELAND, FL 33805

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: AMBROSE AUSTIN

MR.

03/09/2009

Electronic Signature of Signing Officer or Director

Date