2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2009
Secretary of State

DOCUMENT# N96000004009

Entity Name: ZION MISSION, INC.

Current Principal Place of Business:

3400 NE 1 AVE
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

3400 NE 1 AVE
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 65-0952411 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROBERT, MARTHA
3400 NE 1 AVE
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

ROBERT, MARTHA R P
3400 NE 1 AVE
POMPANO BEACH, FL 33064 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: MARTHA R ROBERT 07/08/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: SD ( ) Delete
Name: ADILSON, ROBERT P
Address: 3400 NE 1ST AVE., # HOUSE
City-St-Zip: POMPANO BEACH, FL 33064

Title: TD ( ) Delete
Name: JUSSARA, ROBERT R
Address: 3400 NE 1ST AVE., # HOUSE
City-St-Zip: POMPANO BEACH, FL 33064

Title: SD ( ) Delete
Name: ROBERT, CAROLINA R
Address: 3400 NE 1ST AVE., #HOUSE
City-St-Zip: POMPANO BEACH, FL 33064

Title: P ( ) Delete
Name: ROBERT, MARTHA
Address: 3400 NE 1TH AVE., #B
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: MARTHA R ROBERT P 07/08/2009
Electronic Signature of Signing Officer or Director Date