


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90048 047 ****70.00

DOCUMENT # N96000005529 1. Entity Name GREATER NEW ZION HOPE OUTREACH MINISTRIES, INC.					
Principal Place of Business 2600 W. HANNONVILLE RD. #7 POMPANO BEACH FL 33069			Mailing Address 2510 N.W. 31 AVE. FORT LAUDERDALE FL 33311		
2. Principal Place of Business 2600 W. HANNONVILLE RD. #7		3. Mailing Address 2510 N.W. 31 AVE.			
Suite, Apt. #, etc. #7		Suite, Apt. #, etc.			
City & State POMPANO BEACH FL.		City & State		4. FEI Number NO-T APPLICABLE	
Zip 33069		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HARLEY, JOSEPH L 2510 N.W. 31 AVE. FORT LAUDERDALE FL 33311			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reconstituting)</small> <div style="float: right;">DATE _____</div>					
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HARLEY, JOSEPH L SR 2510 NW 31ST AVE FORT LAUDERDALE FL 33311	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROBINSON, ERNESTINE 2656 N.W. 9TH STREET POMPANO BEACH FL 33069	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D NELSON, JOE JR 2400 W BROWARD BLVD LOT 814 FORT LAUDERDALE FL 33312	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST RILES, HENRIETTA 6860 N.W. 46 COURT LAUDERHILL FL 33319	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			

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 empowered.

SIGNATURE: Joseph Harley 2/8/06