FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9700006119

MOUNT ZION BAPTIST CHURCH, INC.

Principal Place of Business RT 5. BOX 87-B

Mailing Address

RT 5. BOX 87-B

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90191 045 ****61.25

T (BANKIAN BIB LBING KERKI BAKK ARKI ARKIN BUNK ARKIR BING HING) (1801-1801)

OUINCY FL 32	2351	QUINCY FL 32351			<u> </u>			
2. Principal F	2. Principal Place of Business 2a. Mailing Address 26				Date Incorporated or Qualifed 10/29/1997			
Suite, Apt.	•	Suite, Apt. #, etc.			4. FEI Number 59-2907868			lied For Applicable = 3
City & Star	de	City & State			Certificate of Status Desired	0	\$8.75 A	dditional
Zip 24	Country	Zip 29 3	Count	у	Election Campaign Financing Trust Fund Contribution		\$5.00 Added to	•
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent								
			8	1 Name		•		
STEWART, DIAMOND E REV				2 Street A	ress (P.O. Box Number is Not Acceptable)			
RT 5, BOX 87-B								
QUINCY FL 32351			8	3			.*	
			8	4 City		FL	85 Zip C	ode
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. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes. SIGNATURE Signature Typed or finish name of registered agent and the if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO O	FFICERS AN		
TITLE	P	☐ DELETE	1.1 TITLE				☐ Change	Addition
NAME	STEWART, DIAMOND E REV	1.2 N		፤	•			ļ
STREET ADDRESS	RT 5, BOX 87B			ET ADDRESS		•		
CITY-ST-ZIP			1.4 CITY-	1.4 CITY-ST-ZIP			-/-	
TITLE	T	☐ DELETE	2.1 TITLE			1	Change	Addition
NAME	HULMAN, ROBERT	22N		≣	Holm ANEER Pobe	rT.	**	
STREET ADDRESS	· · · · ·		2.3 STRE	ET ADDRESS	Home W. Morran			
CITY-ST-ZIP	QUINCY FL 32351	2.		-ST-ZIP			_/_	
TITLE	T	☐ DELETE	3.1 TITLE			•	Change	☐ Addition
NAME	CHANTS, JERRY		3.2 NAMI	E	ChoAts, Jerry			
STREET ADDRESS	ADD IL MAN OT		3.3 STRE	ET ADDRESS				

CITY-ST-ZIP 14. I 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 the attachment with an address, with all other like empowered.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

Z DELETE

□ DELETE

□ DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

NAME

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

QUINCY FL 32351

SADLER, JOHN E

QUINCY FL 32351

RT. 5

Stephens

Addition

Addition

Addition

☐ Change

☐ Change

Change