2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2009
Secretary of State

DOCUMENT# N97000006198

Entity Name: GREATER NEW MOUNT ZION FREEWILL BAPTIST CHURCH INCORPORATED

Current Principal Place of Business:

3041 EAST DANIELS ROAD
PLANT CITY, FL 33567

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2020
PLANT CITY, FL 33564

New Mailing Address:

FEI Number: 59-3240337 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DINK, JAMES DEACON
801 EAST MCDONALD ROAD
PLANT CITY, FL 33567 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: DINK, JAMES JR.
Address: 801 EAST MCDONALD ROAD
City-St-Zip: PLANT CITY, FL 33567

Title: S ( ) Delete
Name: HOLTZCLAW, ANNIE R
Address: 1129 CORD GRASS CT
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: C ( ) Delete
Name: RUCKER, MAMIE L
Address: 1135 CORD GRASS CT
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: T ( ) Delete
Name: HORTON, JOYCE SIS.
Address: 2404 BRANCHWOOD PLACE
City-St-Zip: PLANT CITY, FL 33567

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: ANNIE RUTH HOLTZCLAW S 03/29/2009

Electronic Signature of Signing Officer or Director — Date