## **2001 UNIFORM BUSINESS REPORT (UBR)**

## **FILED** Jan 20, 2001 8:00 am Secretary of State DOCUMENT # N98000005488 MT. ZION PRIMITIVE BAPTIST CHURCH, INC. OF WEST 01-20-2001 90017 025 \*\*\*\*70.00 Principal Place of Business Mailing Address 1425 9TH STREET 1425 9TH STREET WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0927774 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) REID, CORNICE 1425 9TH STREET WEST PALM BEACH FL 33401 Zip Code City FI 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. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: **\$5.00** May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Addition ☐ Change TITLE ☐ Delete TITLE Sec. NAME LILLY, COPELAND NAME STREET ADDRESS STREET ADDRESS 1645 S. 25TH COURT CITY-ST-7IP CITY-ST-ZIP RIVIERA BEACH FL 33404 TITLE ☐ Delete TITLE REID, CORNICE NAME NAME STREET ADDRESS STREET ADDRESS 1425 9TH STREET CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 TITLE Addition Delete TITLE HARMON, JOE L NAME NAME STREET ADDRESS STREET ADDRESS 1091 26TH COURT CITY-ST-ZIP CITY-ST-ZIP **RIVIERA BEACH FL 33404** ☐ Change Addition TITLE ☐ Delete TITLE FOULKS, LESTER NAME NAME STREET ADDRESS STREET ADDRESS 1013 20TH STREET CITY-ST-ZIP CITY-ST-7IP WEST PALM BEACH FL 33401 Delete ☐ Addition TITLE Change TITLE WILLIAM, KEITH NAME NAME STREET ADDRESS 2730 FOXHALL DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33409 TITLE ☐ Delete TITLE Change ☐ Addition WOODSON, FANNIE NAME NAME STREET ADDRESS STREET ADDRESS 1480 13TH STREET CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 of 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:

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