

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2007 08:00 AM
Secretary of State

DOCUMENT # N98000006200

1. Entity Name
ZERUBBABEL MINISTRIES INTERNATIONAL, INC.



Principal Place of Business
**112 PENNOCK TRACE DR
JUPITER, FL 33458**

Mailing Address
**112 PENNOCK TRACE DR
JUPITER, FL 33458**



01042007 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
59-3483079

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**COOK, RICHARD G
112 PENNOCK TRACE DR
JUPITER, FL 33458**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	COOK, DICK
STREET ADDRESS	112 PENNOCK TRACE
CITY-ST-ZIP	JUPITER, FL 33458
TITLE	D
NAME	FAIRBANKS, JIM
STREET ADDRESS	158 HECK RD
CITY-ST-ZIP	DECATUR, TN 373228067
TITLE	D
NAME	GORTON, MAY E
STREET ADDRESS	227 EMERALD DRIVE N
CITY-ST-ZIP	INDIAN HARBOUR BEACH, FL 32937
TITLE	D
NAME	GORTON, VAUGH P
STREET ADDRESS	227 EMERALD DRIVE N
CITY-ST-ZIP	INDIAN HARBOUR BEACH, FL 32937
TITLE	D
NAME	KOLBAS, CHERILYN
STREET ADDRESS	302 WILSON ST.
CITY-ST-ZIP	ERIE, PA 16507
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/23/07-80013-002 70.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

VAUGHN P. GORTON