2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006
Secretary of State

DOCUMENT# N99000004763

Entity Name: AMBASSADORS OF ZION MINISTRIES, INC.

Current Principal Place of Business:

6205 S DALE MABRY HWY
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

PO BOX 130088
TAMPA, FL 336810088

New Mailing Address:

FEI Number: 62-1781581 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BAILEY, DANA B PASTOR
13440 WHITE ELK LOOP
TAMPA, FL 33626 US

Name and Address of New Registered Agent:

BAILEY, DANA B PASTOR
12017 CITRUS FALLS CR. #210
TAMPA, FL 33625 US

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: _____ 04/17/2006
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BAILEY, DANA B
Address: 13440 WHITE ELK LOOP
City-St-Zip: TAMPA, FL 33626

Title: VD ( ) Delete
Name: BAILEY, TERESA M
Address: 13440 WHITE ELK LOOP
City-St-Zip: TAMPA, FL 33626

Title: SD ( ) Delete
Name: PARKER, CARZET Q
Address: 6102 WEBB RD #912
City-St-Zip: TAMPA, FL 33615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BAILEY, DANA B
Address: 12017 CITRUS FALLS CR. #210
City-St-Zip: TAMPA, FL 33625

Title: VD (X) Change ( ) Addition
Name: BAILEY, TERESA M
Address: 12017 CITRUS FALLS CR. #210
City-St-Zip: TAMPA, FL 33625

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DANA B. BAILEY PD 04/17/2006
Electronic Signature of Signing Officer or Director — Date