

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004763

FILED
Mar 22, 2009
Secretary of State

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
7813 PALMERA POINTE CIRCLE
TAMPA, FL 33615 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: PD () Delete
Name: BAILEY, DANA B
Address: 7813 PALMERA POINTE CIRCLE
City-St-Zip: TAMPA, FL 33615

Title: VD () Delete
Name: BAILEY, TERESA M
Address: 7813 PALMERA POINTE CIRCLE
City-St-Zip: TAMPA, FL 33615

Title: SD () Delete
Name: HOYTE, ANGELA
Address: 9411 BROOKS ST
City-St-Zip: TAMPA, FL 33612

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:

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: DANA B. BAILEY

PD

03/22/2009

Electronic Signature of Signing Officer or Director

Date