2003 NOT-FOR-PROFIT CORPORATION JUNIFORM BUSINESS REPORT (UBR)

Jan 09, 2003 8:00 am Secretary of State DOCUMENT # N9900006474 1. Entity Name 01-09-2003 90136 018 ****61.25 ZION WORSHIP CENTER INC. Principal Place of Business Mailing Address 444 COUNTRY VINYARD DR **60004410** 444 COUNTRY VINYARD DR VALRICO FL 33594 VALRICO FL 33594 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number 07-1680685 City & State --City & State Applied For FIN -59-3628804 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JOSEPH, MATHEWS B REV Street Address (P.O. Box Number is Not Acceptable) 444 COUNTRY VINYARD DR VALRICO FL 33594 City Zip Code 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 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Change Addition JACOB, GEORGE V NAME NAME STREET ADDRESS 444 COUNTRY VINYARD DR STREET ADDRESS CITY-ST-ZIP Valrico FL 33594 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition BEULAH, ROY NAME STREET ADDRESS 444 COUNTRY VINYARD DR STREET ADDRESS CITY-ST-ZIP VALRICO FL 33594 CITY-ST-ZIE TITLE ☐ Delete TITLE Change Addition KURIAN, K V NAME NAME STREET ADDRESS 444 COUNTRY VINYARD DR STREET ADDRESS CITY-ST-ZIP VALRICO FL 33594 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing 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 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Malkewy ABY HOSEPILL

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861-7693

FILED

Attachment # N9900006 GYTU OF THE TREASURY

INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINNATI, OH 45201

AUG 15 2002

Date:

ZION WORSHIP CENTER INC C/O REV MATHEWS B JOSEPH 444 COUNTRY VINEYARD DR VALRICO, FL 33594 Employer Identification Number:
59-3628804
DLN:
17053199024002
Contact Person:
MITCHELL P STEELE ID# 31360
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Form 990 Required:
No
Addendum Applies:

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

No

We have further determined that you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in sections 509(a)(1) and 170(b)(1)(A)(i).

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, you should inform us of all changes in your name or address.

As of January 1, 1984, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more you pay to each of your employees during a calendar year. This does not apply, however, if you make or have made a timely election under section 3121(w) of the Code to be exempt from such tax. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Since you are not a private foundation, you are not subject to the excise taxes under Chapter 42 of the Code. However, if you are involved in an excess benefit transaction, that transaction might be subject to the excise taxes of section 4958. Additionally, you are not automatically exempt from other federal excise taxes. If you have any questions about excise, employment, or other federal taxes, please contact your key district office.

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(1) status, a grantor or contributor may not rely

Letter 947 (DO/CG)