

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000001680

Entity Name: ZION RESIDENTIAL INC.

FILED
Jan 23, 2009
Secretary of State

Current Principal Place of Business:

3956 SUNBEAM ROAD
SUITE 1
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

5157 SADDLEHORN DRIVE S
JACKSONVILLE, FL 32257 US

Current Mailing Address:

P.O. BOX 23634
JACKSONVILLE, FL 32241 US

New Mailing Address:

P.O. BOX 56469
JACKSONVILLE, FL 32241 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KING, MARIA V
3956 SUNBEAM ROAD
SUITE 1
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

KING, MARIA V
5157 SADDLEHORN DRIVE S
JACKSONVILLE, FL 32257 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: MARIA V KING

01/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LAURY, ROBERT
Address: 122 WESTGLEN DRIVE
City-St-Zip: FORT PIERCE, FL 34981 US

Title: VP () Delete
Name: KING, MARIA V
Address: 3956 SUNBEAM ROAD
City-St-Zip: JACKSONVILLE, FL 32257

Title: S () Delete
Name: LAURY, FATIMATA B
Address: 122 WESTGLEN DRIVE
City-St-Zip: FORT PIERCE, FL 34981

Title: V (X) Delete
Name: LOPEZ, GREGORY
Address: P.O. BOX 23634
City-St-Zip: JACKSONVILLE, FL 32241 US

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT LAURY

P

01/23/2009

Electronic Signature of Signing Officer or Director

Date