

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 747224

**Entity Name:** MT. ZION A.M.E. CHURCH OF TAMPA, INC.

**Current Principal Place of Business:**

7401 KISSIMMEE ST  
TAMPA, FL 33616

**FILED**  
**Apr 24, 2014**  
**Secretary of State**  
**CC5508326961**

**Current Mailing Address:**

7401 KISSIMMEE ST  
TAMPA, FL 33616 US

**FEI Number: 25-0316600**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

LADSON, LOUIS STEWARD  
4402 W PRESCOTT STREET  
TAMPA, FL 33616 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title S  
Name JEFFERSON, SYLVIA  
Address 1026 W. ALFRED STREET  
City-State-Zip: TAMPA FL 33603

Title VD  
Name JONES, DIANE  
Address 7401 KISSIMMEE STREET  
City-State-Zip: TAMPA FL 33616

Title T  
Name GLENN, CLARA  
Address 7409 S SHERRILL ST  
City-State-Zip: TAMPA FL 33616

Title D  
Name BENSON, CHERIE  
Address 1225 BLUFIELD AVE  
City-State-Zip: BRANDON FL 33511

Title D  
Name PHELPS, THERESA  
Address 6210 W. THORPE STREET  
City-State-Zip: TAMPA FL 33610

Title D  
Name WILLIAMS, BILLIE  
Address 3923 WEST PALMETTO ST.  
City-State-Zip: TAMPA FL 33607

*I hereby 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 all other like empowered.*

**SIGNATURE: THERESA PHELPS**

**D**

**04/24/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date