#### **2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000009749

Entity Name: MT. ZURA FULL GOSPEL BAPTIST CHURCH INCORPORATED

FILED Apr 29, 2022 Secretary of State 9524250131CC

## **Current Principal Place of Business:**

25258 NW 2ND AVE. NEWBERRY. FL 32669

# **Current Mailing Address:**

P.O. BOX 1517

NEWBERRY, FL 32669

FEI Number: 59-3665096 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

INGRAM, OTTO 25142 NW 7TH AVE NEWBERRY, FL 32669 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: OTTO INGRAM 04/29/2022

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title VP, VICE CHAIRPERSON, DIRECTOR Title DIRECTOR

Name WATSON, GAIL Name WATSON, WILLIE LEE

Address P.O.BOX 577 Address P.O. BOX 577

City-State-Zip: NEWBERRY FL 32669 City-State-Zip: NEWBERRY FL 32669

Title CHAIRPERSON, DIRECTOR Title DIRECTOR

NameINGRAM, OTTONameWILLIAMS, WAYNEAddress25142 NW 7TH AVEAddress25408 SW 17TH AVE.City-State-Zip:NEWBERRY FL 32669City-State-Zip:NEWBERRY FL 32669

TitleDIRECTORTitleDIRECTORNameAUSGOOD, BRYANNameMAY, DIANEAddress13714 NW SR 45AddressP.O. BOX 1530

City-State-Zip: HIGH SPRINGS FL 32643 City-State-Zip: NEWBERRY FL 32669

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: GAIL KING WATSON DIRECTOR 04/29/2022