2017 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N12000000352

Entity Name: HISTORIC MOUNT ZION SOCIAL SERVICES, INC.

FILED Jun 08, 2017 **Secretary of State** CR4363171273

Current Principal Place of Business:

201 EAST BEAVER STREET JACKSONVILLE, FL 32202

Current Mailing Address:

201 EAST BEAVER STREET JACKSONVILLE, FL 32202

FEI Number: 45-4506183 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PARKER, AVA L 101 EAST UNION STREET SUITE 200 JACKSONVILLE, FL 32202 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: AVA L PARKER 06/08/2017

Electronic Signature of Registered Agent

Officer/Director Detail:

Title C/D Title VC/D

EWING, PEARCE SR. Name Name PRIER, LEMORRIS DR.

Address 6948 MONTREAL DRIVE Address 10990 HICKORY TRACE LAND JACKSONVILLE FL 32256 City-State-Zip: City-State-Zip: LAKELAND FL 33810

Title T/D Title S/D

Name RUTHLAND, ALFRED Name MITCHELL, WANDA L

Address 8604 ETHANS GLEN TERRANCE Address 4538 CAPE SABLE COURTS

JACKSONVILLE FL 32256 City-State-Zip: JACKSONVILLE FL 32277 City-State-Zip:

Title Title

MCINTOCH, CHARLES DR. Name Name GOODMAN, ALEXIS 4063 REBAULT RIVER LANE Address Address 13956 BRADLEY COVE RD. City-State-Zip: JACKSONVILLE FL 32208

City-State-Zip: JACKSONVILLE FL 32218

Title DIRECTOR Title **DIRECTOR** Name

HARRY, KEMP Name ROBINSON, REGINALD

Address 6700 BOWDEN RD. Address 11798 CHERRY BARK DR. E 2003

City-State-Zip: JACKSONVILLE FL 32218 City-State-Zip: JACKSONVILLE FL 32216

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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: PEARCE EWING SR.

DIRECTOR

06/08/2017

Date

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name WILLIAMS, SHEILA Name JOHNSON, WILLIE

Address 11498 SIR BARTON COURT Address 25475 MARSH LANDING PKWY

City-State-Zip: JACKSONVILLE FL 32218 City-State-Zip: PONTE VEDRA BEACH FL 32082