

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

DOCUMENT# N14000011134

**Entity Name:** ZION BETHEL MISSIONARY BAPTIST CHURCH INC

**Current Principal Place of Business:**

21035 HWY 441 N  
MICANOPY, FL 32667

**Current Mailing Address:**

PO BOX 509  
MCINTOSH, FL 32664 US

**FEI Number:** 47-2406768

**Certificate of Status Desired:** No

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

PERKINS, MICHAEL A  
2411 NE 13TH AVENUE  
GAINESVILLE, FL 32641 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 FINANCIAL SECRETARY  
Name CHRISTY, ROSEMARY  
Address 2119 NW 30TH PL  
City-State-Zip: GAINESVILLE FL 32605

Title TRUSTEE  
Name TURNER, HENRIETTA  
Address 21674 NW 58TH CT  
City-State-Zip: MICANOPY FL 32667

Title DEACONESS  
Name BAILEY-NEWSOME, BERNITA  
Address PO BOX 196  
City-State-Zip: ORANGE LAKE FL 32681

Title TREASURER  
Name TOWNSEND, JANET  
Address 21696 NW 58TH CT  
City-State-Zip: MICANOPY FL 32667

Title TRUSTEE  
Name MONTGOMERY, BILLY  
Address PO BOX 98  
City-State-Zip: MCINTOSH FL 32664

Title DEACON  
Name TAYLOR, MARC  
Address 2119 NW 30TH PL  
City-State-Zip: GAINESVILLE FL 32605

*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:** ROSEMARY CHRISTY

**FINANCIAL SECRETARY**

**04/30/2022**

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

\_\_\_\_\_  
Date