2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000005800

Entity Name: MT ZION AFRICAN METHODIST EPISCOPAL CHURCH OF

MONDON HILL, INC.

Current Principal Place of Business:

8160 WPA RD.

BROOKSVILLE, FL 34601

Current Mailing Address:

8160 WPA RD.

BROOKSVILLE, FL 34601 US

FEI Number: APPLIED FOR Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WALKER, VALARIE J 4881 CYPRESS WOODS DR. #3112 ORLANDO, FL 32811 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

FILED Jun 06, 2017

Secretary of State

CC6025603536

Officer/Director Detail:

Title Title **PASTOR**

Name LAWSON, LEWIS C Name HARRISON, AQUINETTE K

Address 8160 WPA RD. Address 8160 WPA RD.

City-State-Zip: BROOKSVILLE FL 34601 City-State-Zip: BROOKSVILLE FL 34601

Title **STEWARD** Title **STEWARD** LOGAN, CECIL Name BYAM, LUCILLE Name Address 8160 WPA RD. Address 8160 WPA RD.

City-State-Zip: BROOKSVILLE FL 34601 City-State-Zip: **BROOKSVILLE FL 34601**

Title **STEWARD** Title **STEWARD**

Name COOK, FAIRELLA Name TAVARES, LARRY Address 8160 WPA RD. 8160 WPA RD. Address

City-State-Zip: BROOKSVILLE FL 34601 BROOKSVILLE FL 34601 City-State-Zip:

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: AQUINETTE K. HARRISON

PASTOR

06/06/2017