

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000005800

**Entity Name:** MT ZION AFRICAN METHODIST EPISCOPAL CHURCH OF  
MONDON HILL, INC.

**FILED**  
**May 08, 2024**  
**Secretary of State**  
**3472386854CC**

**Current Principal Place of Business:**

8160 WPA RD.  
BROOKSVILLE, FL 34601

**Current Mailing Address:**

8160 WPA RD.  
BROOKSVILLE, FL 34601 US

**FEI Number: 93-4792487**

**Certificate of Status Desired: Yes**

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

HARRIS, DAWN S  
10747 PORTER TRAIL  
CLERMONT, FL 34711 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: DAWN S. HARRIS**

**05/08/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TRUSTEE  
Name LAWSON, LEWIS C  
Address 8160 WPA RD.  
City-State-Zip: BROOKSVILLE FL 34601

Title PASTOR  
Name HARRIS, DAWN S PASTOR  
Address 8160 WPA RD.  
City-State-Zip: BROOKSVILLE FL 34601

Title STEWARD  
Name ADAMS, TIFFANY  
Address 8160 WPA RD.  
City-State-Zip: BROOKSVILLE FL 34601

Title STEWARD  
Name LOGAN, CECIL  
Address 8160 WPA RD.  
City-State-Zip: BROOKSVILLE FL 34601

Title STEWARD  
Name TAVARES, LARRY  
Address 8160 WPA RD.  
City-State-Zip: BROOKSVILLE FL 34601

Title STEWARD  
Name COOK, FAIRELLA  
Address 8160 WPA RD.  
City-State-Zip: BROOKSVILLE FL 34601

Title STEWARD  
Name BENNETT, SARAH  
Address 8160 WPA ROAD  
City-State-Zip: BROOKSVILLE FL 34601

*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: DAWN S HARRIS**

**PASTOR**

**05/08/2024**

Electronic Signature of Signing Officer/Director Detail

Date