

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

DOCUMENT# N21000013565

**Entity Name:** NEW MOUNT ZION MISSIONARY BAPTIST CHURCH OF SEMINOLA, INCORPORATED

**Current Principal Place of Business:**

500 WEST 23RD STREET  
SEMINOLA/ HIALEAH, FL 33010

**Current Mailing Address:**

500 WEST 23RD STREET  
SEMINOLA/ HIALEAH, FL 33010

**FEI Number: 87-3775704**

**Certificate of Status Desired: No**

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

ANDERSON, BERNARD  
18541 N W 8TH ROAD  
MIAMI, FL 33169, FL 33169 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 P  
Name ANDERSON, BERNARD  
Address 18541 N W 8TH ROAD  
City-State-Zip: MIAMI, FL 33169 FL 33169

Title DEACON  
Name STEPHENSON, GLENN  
Address 500 WEST 23RD STREET  
City-State-Zip: HIALEAH FL 33010

Title D  
Name HADDOCK, HAMILTON  
Address 500 WEST 23RD STREET  
City-State-Zip: HIALEAH FL 33010

Title D  
Name WOMBLE, ANNETTE  
Address 500 WEST 23RD STREET  
City-State-Zip: HIALEAH FL 33010

Title COO  
Name ANDERSON, OLLIE  
Address 500 WEST 23RD STREET  
City-State-Zip: SEMINOLA/ HIALEAH FL 33010

Title CFO  
Name REESE, DOUGLAS  
Address 500 W 23RD STREET  
City-State-Zip: HIALEAH FL 33010

*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: BERNARD ANDERSON

P

04/10/2024

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

\_\_\_\_\_  
Date