

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37414

Entity Name: MT. ZION A.M.E. CHURCH OF BELLE GLADE, INC.

Current Principal Place of Business:

249 S. W. 10TH STREET
BELLE GLADE, FL 33430

Current Mailing Address:

P.O. BOX 1688
BELLE GLADE, FL 33430

FEI Number: 65-0421024

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COOPER, WILLIAM EJR.
6543 SPRING MEADOW DRIVE
GREENACRES, FL 33413 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 PD
Name COOPER, WILLIAM EJR.
Address 6543 SPRING MEADOW DRIVE
City-State-Zip: GREENACRES FL 33413

Title VD
Name WHITLEY, GLORIA
Address 832 S.W. AVENUE H
City-State-Zip: BELLE GLADE FL 33430

Title DIRECTOR
Name JONES, ROOSEVELT
Address 21 ROOSEVELT ST.
City-State-Zip: BELLE GLADE FL 33430

Title SD
Name VEREEN, JULIA
Address 648 SW 3RD ST
City-State-Zip: BELLE GLADE FL 33430

Title TREASURER
Name HARRISON, MAE CAMPBELL
Address 340 NOAH COURT
City-State-Zip: BELLE GLADE FL 33430

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: WILLIAM E. COOPER JR.

PRESIDENT

02/26/2014

Electronic Signature of Signing Officer/Director Detail

Date