

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003936

FILED
Feb 28, 2022
Secretary of State
4866889433CC

Entity Name: ZION HOPE MISSIONARY BAPTIST CHURCH OF FORT MYERS, FLORIDA, INC.

Current Principal Place of Business:

2424 BROADWAY
FORT MYERS, FL 33901

Current Mailing Address:

P. O. BOX 2133
FORT MYERS, FL 33902

FEI Number: 65-0487409

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOUSTON, GRACIE
7 EAST CLERMONT CT
FORT MYERS, FL 33916 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: GRACIE HOUSTON

02/28/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name WATKINS, SAMUEL B. JR.
Address P. O. BOX 2133
2447 DUPREE ST.
City-State-Zip: FORT MYERS FL 33916

Title VP
Name CROCKETT, THURMAN
Address 1682 HEIMAN ST.
City-State-Zip: FORT MYERS FL 33905

Title D
Name WATKINS, SAMUEL REV.
Address P. O. BOX 2133
2447 DUPREE ST.
City-State-Zip: FORT MYERS FL 33902

Title S
Name NEAL, ELI JR.
Address 3709 10TH ST. W.
City-State-Zip: LEHIGH FL 33971

Title D
Name SANDERS, MATTHEW
Address 1783 SHOEMAKER BLVD.
City-State-Zip: FORT MYERS FL 33916

Title D
Name TYRE, ARTHUR
Address 1437 BROOKHILL DR.
City-State-Zip: FORT MYERS FL 33916

Title D
Name HOUSTON, GRACIE
Address 7 EAST CLERMONT CT
City-State-Zip: FORT MYERS FL 33916

Title VP
Name PLUMMER, GEORGE
Address 2240 BARDEN ST.
City-State-Zip: FT. MYERS, FL. 33916 FL

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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: GRACIE HOUSTON

CHURCH CLERK

02/28/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name NEAL, ELI JR.
Address 3709 10TH ST. W.
 P. O.BOX 36
City-State-Zip: LEHIGH ACRES FL 33970