FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **700494** **(8)**

1. Corporation Name

MACEDONIA BAPTIST CHURCH OF RIVIERA BEACH, FLORIDA, INC.

Principal Place of Business	Mailing Address
748 WEST 9TH ST P.O. BOX 9621 RIVIERA BEACH FL 33404-0821	748 WEST 9TH ST P.O. BOX 9621 RIVIERA BEACH FL 33404-0821

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/24/1960
3a. Date of Last Report: 06/16/1994
4. FEI Number: 65-0100318 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / County 24 / 25	Zip / County 29 / 30

9. Name and Address of Current Registered Agent

PATTERSON, ARTHUR L.
440 S. 31ST ST.
RIVIERA BCH FL 33404

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City **FL** 35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Arthur L Patterson — 4/30/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	~~DC~~	11 TITLE	T/TR	☒ Change ☐ Addition
NAME	SIMMONS, JOHN HENRY	12 NAME		
STREET ADDRESS	817 W. 3RD STREET	13 STREET ADDRESS		
CITY-ST-ZIP	RIVIERA BCH, FL 00000	14 CITY-ST-ZIP		
TITLE	S	21 TITLE	S	☒ Change ☐ Addition
NAME	~~RUFF, JANICE~~	22 NAME	SMITH, LINDA	
STREET ADDRESS	~~C/O 748 WEST NINTH STREET~~	23 STREET ADDRESS	c/o 748 W. 9th STREET	
CITY-ST-ZIP	~~RIVIERA BEACH FL~~	24 CITY-ST-ZIP	RIVIERA BEACH, FL 33404	
TITLE	~~DC~~	31 TITLE	TR/V	☐ Change ☐ Addition
NAME	GRAHAM, ALBERT	32 NAME		
STREET ADDRESS	1605 43RD ST	33 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BCH FL	34 CITY-ST-ZIP		
TITLE	~~DT~~	41 TITLE	M	☒ Change ☐ Addition
NAME	LAWRENCE, JOSEPH	42 NAME		
STREET ADDRESS	1113 W. 27TH STREET	43 STREET ADDRESS		
CITY-ST-ZIP	RIVIERA BCH, FL 00000	44 CITY-ST-ZIP		
TITLE	~~MD~~	51 TITLE	DC/TR	☒ Change ☐ Addition
NAME	PATTERSON, ARTHUR	52 NAME		
STREET ADDRESS	440 W 31ST STREET	53 STREET ADDRESS		
CITY-ST-ZIP	RIVIERA BCH, FL 00000	54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 above, or on an attachment with an address.

SIGNATURE: Arthur L Patterson — 4/30/95 — (407) 842-1944
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0047911