

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008194

FILED
Mar 25, 2008
Secretary of State

Entity Name: MACEDONA GROUP HOME, INCORPORATED

Current Principal Place of Business:

189 SHILOH POINT RD
OAK HILL, FL 32759

New Principal Place of Business:

Current Mailing Address:

189 SHILOH POINT RD
OAK HILL, FL 32759

New Mailing Address:

FEI Number: 55-0840264 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCGRAW, HERBERT
183 SHILOH POINT RD
OAK HILL, FL 32759 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCGRAW, HERBERT
Address: 183 SHILOH POINT RD
City-St-Zip: OAK HILL, FL 32759

Title: D () Delete
Name: THOMAS, HENRY
Address: 189 SHILOH POINT RD
City-St-Zip: OAK HILL, FL 32759

Title: T () Delete
Name: DIXON, CYNTHIA
Address: 179 WYATT STREET
City-St-Zip: OAK HILL, FL 32759

Title: S () Delete
Name: NUNNALLY, REGINA
Address: 1161 ESSEX RD
City-St-Zip: DAYTONA BEACH, FL 32114

Title: AS () Delete
Name: DOLES, DENISE
Address: 3210 INDIA PALM DR
City-St-Zip: EDGEWATER, FL 32141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HERBERT MCGRAW

D

03/25/2008

Electronic Signature of Signing Officer or Director

_____ Date