2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49822

FILED Jan 07, 2009 Secretary of State

Entity Name: MADISON STREET BAPTIST CHURCH

Current Principal Place of Business: New Principal Place of Business:

900 W MADISON ST STARKE, FL 32091

Current Mailing Address: New Mailing Address:

900 W MADISON ST STARKE, FL 32091

FEI Number: 59-6032858 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

EVERSON, CHAD DR

10239 SW 80TH PLACE
HAMPTON, FL 32044 US

THURMAN, APRIL L
19631 NW 71ST AVE
STARKE, FL 32091 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: APRIL L. THURMAN 01/07/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 TR
 () Delete
 Title:
 TR
 (X) Change () Addition

 Name:
 CHALKER, ADAM MR
 Name:
 HANSON, BRENT MR

 Address:
 501 COLLEY RD
 Address:
 304 N ORANGE ST

 City-St-Zip:
 STARKE, FL 32091 US

Title: () Delete Title: (X) Change () Addition CRAWFORD, THOMAS MR BOWEN, ROBERT MR Name: Name: Address: 7715 NW CR 233 Address: 5252 NW 185 TERRACE City-St-Zip: STARKE, FL 32091 City-St-Zip: STARKE, FL 32091 US

Title: TR () Delete Title: TR (X) Change () Addition Name: BLALOCK, CHARLES MR Name: JACKSON, MARC MR

 Address:
 523 W EUCLID ST
 Address:
 15672 NE 14TH AVE

 City-St-Zip:
 STARKE, FL 32091
 City-St-Zip:
 STARKE, FL 32091

Title: TR () Delete Title: () Change () Addition

 Name:
 DOUGLAS, EVAN MR
 Name:

 Address:
 6320 SEMINOLE ST
 Address:

 City-St-Zip:
 STARKE, FL 32091
 City-St-Zip:

 Name:
 SHEMER, MICHAEL MR
 Name:

 Address:
 2229 NW 251ST STREET
 Address:

 City-St-Zip:
 LAWTEY, FL 32058
 City-St-Zip:

Title: TR (X) Delete Title: () Change () Addition

 Name:
 HANSON, BRENT MR
 Name:

 Address:
 304 N ORANGE ST
 Address:

 City-St-Zip:
 STARKE, FL 32091
 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: BRENT HANSON TR 01/07/2009