

2004

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 OCT -5 AM 9:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 705506

1. Corporation Name

Macedonia Missionary Baptist Church
LAKE GARFIELD, INC.

2. Principal Office Address

1460 E. Seminole Trail

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 285

Suite, Apt. #, etc.

City & State

Bartow, Florida

Zip

33830

Country

Port US

City & State

Bartow, Florida

Zip

33830

Country

US

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number

691968763

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Russell J Patterson

Street Address (P.O. Box Number is Not Acceptable)

2075 Greentree Court

Suite, Apt. #, Etc.

300041678853
10/07/04--01069--002 **70.00

City

Bartow

State

FL

Zip Code

33830

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent

Russell J. Patterson
REGISTERED AGENT MUST SIGN

Date

9-7-04

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Russell J Patterson	2075 Greentree Court	Bartow, FL 33830
V/P	IDA Mae Young	2990 Mays Court	Bartow, FL 33830
T	Carolyn Patterson	2075 Greentree Court	Bartow, FL 33830
S			
D	Donis Joiner	1495 Greentree Ave	Bartow, FL 33830
BS	Martha A Jones	940 Carver Ave	Bartow, FL 33830

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Russell J. Patterson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Russell J. Patterson
Date

9-7-04 (863)
Daytime Phone # 333 9198

CR2E081 (01/04)