

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713289

FILED
May 01, 2007
Secretary of State

Entity Name: MACEDONIA UNITED AMERICAN FREE WILL BAPTIST CHURCH, INC.

Current Principal Place of Business:

871 EAST BAY STREET
WINTER GARDEN, FL 347873238

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 770863
WINTER GARDEN, FL 34787

New Mailing Address:

FEI Number: 59-1008568 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

COLLIER, EUGENE R
324 HERITAGE ESTATE LANE
DELAND, FL 32720 US

Name and Address of New Registered Agent:

COLLIER, EUGENE R
324 HERITAGE ESTATE LANE
DELAND, FL 32720 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: EUGENE COLLIER

05/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COLLIER, EUGENE R
Address: 324 HERTIACE ESTATE LANE
City-St-Zip: DELAND, FL 32720

Title: VPD () Delete
Name: ARTICUSS, TOLLIRCE
Address: 4132 KALWIT LANE
City-St-Zip: ORLANDO, FL 32808

Title: ADMA () Delete
Name: BROWN, JAMES Z
Address: PO BOX 2554
City-St-Zip: APOPKA, FL 32704

Title: TD () Delete
Name: JONES, RUBY
Address: 1433 BASSIN STREET
City-St-Zip: WINTER GARDEN, FL 34787

Title: MBT () Delete
Name: PICKETT, GRACE
Address: 1461 KENNY COURT
City-St-Zip: WINTER GARDEN, FL 34787

Title: TT () Delete
Name: WILLIAMS, LILLIAN
Address: 722 PINE STREET
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COLLIER, EUGENE R
Address: 324 HERITAGE ESTATE LANE
City-St-Zip: DELAND, FL 32720

Title: VPD (X) Change () Addition
Name: ARTICUSS, TOLLIVER
Address: 4132 KALWIT LANE
City-St-Zip: ORLANDO, FL 32808

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: EUGENE COLLIER

PD

05/01/2007

Electronic Signature of Signing Officer or Director

Date