

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732738

FILED  
Jan 22, 2008  
Secretary of State

**Entity Name:** THE CHURCH OF THE LIVING GOD NEW MACEDONIA, INC.

**Current Principal Place of Business:**

610 S.W. 4TH STREET  
DELRAY BEACH, FL 33444 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 6903  
DELRAY BEACH, FL 33482 US

**New Mailing Address:**

**FEI Number:** 65-0046284      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

QUINCE, LEONARD N JR  
322 SW 1ST AVE  
DELRAY BEACH, FL 33444 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: PCD ( ) Delete  
Name: QUINCE, LEONARD N JR.  
Address: 322 S.W. 1ST AVE  
City-St-Zip: DELRAY BEACH, FL 33444

Title: TSD ( ) Delete  
Name: HEAD, LILLIE Q  
Address: 566 UDELL LANE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: D ( ) Delete  
Name: HUNTER, WILFRED  
Address: 2800 NW 6TH CT.  
City-St-Zip: POMPANO BCH., FL 33069

**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:

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: L. N. QUINCE, JR.

PCD

01/22/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date