## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 25, 2006 08:00 AN Secretary of State

DCCUMENT # 738412  1. Entity Name MACEDONIA'S FIRST BAPTIST CHURCH, INC.						Se	cretary of	State
20300 NE MACEDONIA ROAD 2030			iling Address )300 NE MACEDONIA ROAD .OUNTSTOWN, FL 32424			35411 <b>Sibbe</b> 11 <b>8</b> 18 118	· 前国1·电气制作 医2273 301822 亚汉斯(亚汉斯)	irres 81 iarei
2. Principal Place of Business 3. Ma		3. Mailing Address	falling Addrago					
2. Principal Place of Business 3. Mil		5. Maining Address	Maining Address			M312 B  MM3   11074   128	0,000	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		04112006 CI	ng-NP	CR2E037 (11/05)	
City & State		City & State	City & State		4. FEI Number 59-314939	7	}	plied For t Applicable
Zip	Country	Zip	Country		5. Certificate of St	atus Desired	\$8.75 Add	litional
	6. Name and Address of Current F	Registered Agent	<u>'                                    </u>		7. Name and Add	ress of New R	egistered Agent	
SHELDS, JERRY A				Namø				
21617 NE	MACEDONIA ROAD TOWN, FL 32424		-	Street Address (P.O. Box Number is Not Acceptable)				
			-	City		·	Zip Code	e
<del></del>	named entity submits this statement for					**- 65(5)-	FL }	
	ions of registered agent.  Signature, typed or printed name of registered agent a			gent signature require	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		DATE	
	Signature, typed or printed name or registered agent a	nd due it applicable.	E. Abgrstered A	gent signature rectire	C WHOM TO RECEIVED			
	Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution.   1. Trust Fund Contribution.		\$5.00 May Be Added to Fees		ake check payable to ida Department of St	
10.	OFFICERS, AND DIR		11.	<del></del>	ADDITIONS/CHANG	ES TO OFFICE	RS AND DIRECTORS IN	
title Name	D SHIELDS, JERRY	☐ Delete	TITLE NAME				☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP	21617 NE MACEDONIA ROAD BLOUNTSTOWN, FL		4 · ·	ADDRESS 1-ZIP	9	5/06/06 5/06/06	)533094 -80108-019 61	.25
INTLE	D	☐ Delete	TITLE			····	☐ Change	☐ Addition
NAME STREET ADDRESS	WYRICK, DAN 22445 NE GURIL RUN RD		NAME					į
	ZZ443 NE GUNIL NUN ND		ENDER3	ADDOCTOR				j
CITY-ST-ZIP	BLOUNTSTOWN, FL 32424	-	STREET CITY-ST	ADDRÉSS   F-ZIP			,	
TITLE	D	☐ Delete	CITY-SI	ł			☐ Change	☐ Addition
TITLE NAME	D PITTS, DAVID	☐ Dølele	CITY-SI IJILE NAME	r-ZIP			Change	Addition
TITLE	D	☐ Delete	CITY-SI IJILE NAME	r-zip Address			☐ Change	Addition
TITLE NAME STREET ADDRESS	D PITTS, DAVID 16629 SW CYPRESS STREET BLOUNTSTOWN, FL D	☐ Delete	CITY-SI IJILE NAME STREET	r-zip Address			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D PITTS, DAVID 16629 SW CYPRESS STREET BLOUNTSTOWN, FL D DEES, LISA	☐ Delete	CITY-SI TITLE NAME STREET CITY-SI TITLE NAME	F-ZIP  ADDRESS  T-ZIP				es print à librium
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D PITTS, DAVID 16629 SW CYPRESS STREET BLOUNTSTOWN, FL D	☐ Delete	CITY-SI TITLE NAME STREET CITY-SI TITLE NAME	ADDRESS T. ZIP  ADDRESS ADDRESS				es print à librium
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indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

AIGHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

4.20-06

850-674-5784 Dayling Phone \*