

**2008 FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 26, 2008 08:00 AM
Secretary of State

DOCUMENT # 738412

1. Entity Name
MACEDONIA'S FIRST BAPTIST CHURCH, INC.



Principal Place of Business
**20300 NE MACEDONIA ROAD
BLOUNTSTOWN, FL 32424**

Mailing Address
**20300 NE MACEDONIA ROAD
BLOUNTSTOWN, FL 32424**



01282008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3149397

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SHIELDS, JERRY A
21617 NE MACEDONIA ROAD
BLOUNTSTOWN, FL 32424**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	SHIELDS, JERRY
STREET ADDRESS	21617 NE MACEDONIA ROAD
CITY-ST-ZIP	BLOUNTSTOWN, FL
TITLE	D
NAME	WYRICK, DAN
STREET ADDRESS	22445 NE GURIL RUN RD
CITY-ST-ZIP	BLOUNTSTOWN, FL 32424
TITLE	D
NAME	PITTS, DAVID
STREET ADDRESS	16629 SW CYPRESS STREET
CITY-ST-ZIP	BLOUNTSTOWN, FL
TITLE	D
NAME	DEES, LISA
STREET ADDRESS	21642 NE MAGNOLIA ST PINE ISLAND
CITY-ST-ZIP	BLOUNTSTOWN, FL 32424
TITLE	D
NAME	SEGRS, CLYDE
STREET ADDRESS	21745 NE WL GODWIN RD
CITY-ST-ZIP	BLOUNTSTOWN, FL 32424
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

U00000840282
03/06/08-80042-008 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jerry Shields
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-13-08
Date

850-674-5784
Daytime Phone #