

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005012

FILED
Apr 29, 2008
Secretary of State

Entity Name: MACEDONIA MISSIONARY BAPTIST CHURCH OF STUART FLORIDA, INC.

Current Principal Place of Business:

821 SE BAHAMA AVE
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1888
STUART, FL 34995

New Mailing Address:

FEI Number: 59-1986132

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, NATHANIEL E ESQ
1000 EAST ATLANTIC BLVD STE 204
POMPANO BEACH, FL 33060 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: T () Delete
Name: MCCARTHY, ISSAC
Address: 235 NW CHARLIE GREEN TERRACE
City-St-Zip: STUART, FL 34994

Title: S () Delete
Name: HAZELTON, WILLA M
Address: 462 SE CORK RD
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: T () Delete
Name: JAMISON, MAPLE
Address: 1612 ARAPAHOE AVE
City-St-Zip: STUART, FL 34994

Title: P () Delete
Name: CARTER, MARVIN
Address: 725 BAHAMA AVE
City-St-Zip: STUART, FL 34994

Title: T () Delete
Name: BUTLER, THOMAS
Address: 912 SE TARPON AVE
City-St-Zip: STUART, FL 34994

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:

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: LARRY D. ANDREWS

REV

04/29/2008

Electronic Signature of Signing Officer or Director

Date