

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27160

FILED  
Mar 10, 2012  
Secretary of State

**Entity Name:** FIRST ASSEMBLY OF GOD OF MACCLENNY, INC.

**Current Principal Place of Business:**

206 N. 5TH STREET  
MACCLENNY, FL 32063

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 1188  
MACCLENNY, FL 32063

**New Mailing Address:**

**FEI Number:** 59-2905672      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

POTTS, JOSHUA S  
206 N 5TH STREET  
MACCLENNY, FL 32063      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: P  
Name: POTTS, JOSHUA S  
Address: 206 N 5TH STREET  
City-St-Zip: MACCLENNY, FL 32063

Title: T  
Name: GIDDENS, DARRELL H  
Address: 8483 GIDDENS LANE  
City-St-Zip: BRYCEVILLE, FL 32009

Title: D  
Name: CARLTON, CHARLES M  
Address: 6537 JIM STARLING RD  
City-St-Zip: MACCLENNY, FL 32063

Title: S  
Name: HAMMOCK, TED  
Address: 507 ISLAMORADA DR. S.  
City-St-Zip: MACCLENNY, FL 32063

Title: D  
Name: HELTON, WAYNE  
Address: 209 N. 7TH STREET  
City-St-Zip: MACCLENNY, FL 32063

I hereby 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 all other like empowered.

SIGNATURE: JOSHUA POTTS

P

03/10/2012

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

\_\_\_\_\_ Date