

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 06, 2004 08:00 AM
Secretary of State

DOCUMENT # N29931

1. Entity Name

MACEDONIA MISSIONARY BAPTIST CHURCH OF
BLOUNTSTOWN, INC.



Principal Place of Business

C/O MARVA A. DAVIS
P. O. BOX 159
BLOUNTSTOWN FL 32424
US

Mailing Address

P. O. BOX 159
BLOUNTSTOWN FL 32424
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2956424

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BAKER, ROBERT
5803 BOMBADIL CT
TALLAHASSEE FL 32303

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Robert Baker

2/3/2004

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	S	<input type="checkbox"/> Delete
NAME	ANDREW, MARY L	
STREET ADDRESS	624 S PEAR ST	
CITY - ST - ZIP	BLOUNTSTOWN FL 32424	
TITLE	D	<input type="checkbox"/> Delete
NAME	LEE, LONNIE J.	
STREET ADDRESS	1000 WARD RD.	
CITY - ST - ZIP	BLOUNTSTOWN FL 32424	
TITLE	T	<input type="checkbox"/> Delete
NAME	WILLIAMS, MARK	
STREET ADDRESS	1008 WARD ROAD	
CITY - ST - ZIP	BLOUNTSTOWN FL 32424	
TITLE	T	<input type="checkbox"/> Delete
NAME	HARPER, BERNICE	
STREET ADDRESS	P O BOX 109 N/A	
CITY - ST - ZIP	BLOUNTSTOWN FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BURKES, EDDIE L	
STREET ADDRESS	P O BOX 22 N/A	
CITY - ST - ZIP	BLOUNTSTOWN FL 32424	
TITLE	P	<input type="checkbox"/> Delete
NAME	BAKER, ROBERT ELDER	
STREET ADDRESS	5803 BOMBADIL CT	
CITY - ST - ZIP	TALLAHASSEE FL 32303	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U00000038674 ☐ Change ☐ Addition
02/06/04-80149-004 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Robert Baker

2/3/2004 850-562-7068

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #