2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2007
Secretary of State

DOCUMENT# N39338

Entity Name: FIRST MACEDONIA BAPTIST CHRUCH, INC.

Current Principal Place of Business:

8081 LENOX AVENUE
JACKSONVILLE, FL 32221

New Principal Place of Business:

Current Mailing Address:

8081 LENOX AVENUE
JACKSONVILLE, FL 32221

New Mailing Address:

FEI Number: 59-2066271 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIFORD, WAYNE
9410 COXWELL LANE
JACKSONVILLE, FL 32221 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: PD ( ) Delete
Name: WILLIFORD, WAYNE
Address: 9410 COXWELL LANE
City-St-Zip: JACKSONVILLE, FL 32221

Title: VP ( ) Delete
Name: BEACH, RICK
Address: 2631 STRATTON ROAD
City-St-Zip: JACKSONVILLE, FL 32221

Title: SD ( ) Delete
Name: FORD, BETTY L
Address: 8423 FINWOOD AVE
City-St-Zip: JACKSONVILLE, FL

Title: T ( ) Delete
Name: FORD, BETTY L
Address: PO BOX 6192/8423 FINWOOD AVENUE
City-St-Zip: JACKSONVILLE, FL 32236

Title: VP ( ) Delete
Name: LAVELLE, JERRY
Address: 3023 TOWERMILL LANE
City-St-Zip: ORANGE PARK, FL 32073

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 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: WAYNE WILLIFORD PD 04/03/2007

Electronic Signature of Signing Officer or Director — Date