

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N43138

FILED
Jun 06, 2006
Secretary of State

Entity Name: MACEDONIA MISSIONARY BAPTIST CHURCH OF BROWARD COUNTY, INC.

Current Principal Place of Business:

2380 N.W. 3RD STREET
POMPANO BEACH, FL 330692639

New Principal Place of Business:

Current Mailing Address:

2380 N.W. 3RD STREET
POMPANO BEACH, FL 330692639

New Mailing Address:

FEI Number: 65-0175265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DAVIS, MOSES
2380 N.W. 3RD STREET
POMPANO BEACH, FL 330692639 US

Name and Address of New Registered Agent:

CHARLES, BRANCH R
2380 N.W. 3RD STREET
POMPANO BEACH, FL 330692639 US

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: CHARLES R. BRANCH

06/06/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: MD () Delete
Name: MCDUFFIE, LEONARD
Address: 2380 N.W. 3RD STREET
City-St-Zip: POMPANO BEACH, FL 33069

Title: MD () Delete
Name: GILES, LAURA
Address: 2380 N.W. 3RD STREET
City-St-Zip: POMPANO BEACH, FL 33069

Title: SD () Delete
Name: WIGGINS, ELLEN
Address: 2380 N.W. 3RD STREET
City-St-Zip: POMPANO BEACH, FL 330692639

Title: TD (X) Delete
Name: DAVIS, PHILLIP
Address: 2380 N.W. 3RD STREET
City-St-Zip: POMPANO BEACH, FL 330692639

Title: TD () Delete
Name: GAYLE, WINSTON
Address: 2380 N.W. 3RD STREET
City-St-Zip: POMPANO BEACH, FL 330692639

Title: CD (X) Delete
Name: HILL, ALBERT
Address: 2380 N.W. 3RD STREET
City-St-Zip: POMPANO BEACH, FL 330692639

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:

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: NAOMI GAYLE

SEC

06/06/2006

Electronic Signature of Signing Officer or Director

Date