

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N43138

FILED
Apr 15, 2010
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)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

JAMES, DANIELS
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: JAMES DANIELS

04/15/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: MD
Name: MCDUFFIE, LEONARD
Address: 2380 N.W. 3RD STREET
City-St-Zip: POMPANO BEACH, FL 330692639

Title: MD
Name: MARTIN, MARTIN
Address: 2380 N.W. 3RD STREET
City-St-Zip: POMPANO BEACH, FL 330692639

Title: MD
Name: REED, MACK
Address: 2380 N.W. 3RD STREET
City-St-Zip: POMPANO BEACH, FL 330692639

Title: MD
Name: DIXON, STANLEY
Address: 2380 N.W. 3RD STREET
City-St-Zip: POMPANO BEACH, FL 330692639

Title: MD
Name: COOPER, JOHN
Address: 2380 N.W. 3RD STREET
City-St-Zip: POMPANO BEACH, FL 330692639

Title: MD
Name: DAVIS, PHILLIP
Address: 2380 NW 3RD STREET
City-St-Zip: POMPANO BEACH, FL 330692639

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: JAMES DANIELS

MD

04/15/2010

Electronic Signature of Signing Officer or Director

Date