2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# N50672

Entity Name: FIRST MACEDONIA MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

411 EAST CHARLOTTE AVENUE
PUNTA GORDA, FL 33950 US

New Principal Place of Business:

Current Mailing Address:

411 EAST CHARLOTTE AVENUE
PUNTA GORDA, FL 339509 US

New Mailing Address:

FEI Number: 65-0360165 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROOKS, CARL
411 EAST CHARLOTTE AVENUE
PUNTA GORDA, FL 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: BROOKS, CARL REV
Address: 230 GARVIN ST
City-St-Zip: PUNTA GORDA, FL

Title: VD ( ) Delete
Name: MARION, WALTER
Address: 427 E. SHOWALTER AVENUE
City-St-Zip: PUNTA GORDA, FL

Title: SD ( ) Delete
Name: EDRIS, WILLIAM S
Address: 3233 WOODTHRUSH 12-C
City-St-Zip: PUNTA GORDA, FL

Title: TD ( ) Delete
Name: JONES, WILLIAM
Address: 318 E. CHARLOTTE AVENUE
City-St-Zip: PUNTA GORDA, FL

Title: S ( ) Delete
Name: WASHINGTON, MELODY
Address: 427 E HENRY ST
City-St-Zip: PUNTA GORDA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: GRIFFITHS, DANIELLE
Address: 2226 LAKESHORE CIRCLR
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: SD (X) Change ( ) Addition
Name: EDRIS, WILLIAMS S
Address: 3233 WOODTHRUSH 12-C
City-St-Zip: PUNTA GORDA, FL

Title: TD (X) Change ( ) Addition
Name: COLE, ROBERT
Address: 2290 AARON STREET APT. 115
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: VD (X) Change ( ) Addition
Name: WASHINGTON, MELODY
Address: 427 E HENRY ST
City-St-Zip: PUNTA GORDA, FL

I hereby certify that the information supplied with this filing does not qualify 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: CARL F. BROOKS PD 04/27/2009
Electronic Signature of Signing Officer or Director — Date