

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000139

FILED
Mar 03, 2011
Secretary of State

Entity Name: MACEDONIA HUMAN SERVICES CULTURAL TRAINING CENTER, INC.

Current Principal Place of Business:

411 E. CHARLOTTE AVE.
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

411 E. CHARLOTTE AVE.
PUNTA GORDA, FL 33950

New Mailing Address:

FEI Number: 65-1022259

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROOKS, CARL F
230 GARVIN STREET
PUNTA GORDA, FL 33950 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
Name: BROOKS, CARL F
Address: 230 GARVIN STREET
City-St-Zip: PUNTA GORDA, FL 33950

Title: TD
Name: WILLIAMS, EDRIS S
Address: 3233 WOODTHRUSH DR. 12C
City-St-Zip: PUNTA GORDA, FL 33950

Title: SD
Name: WASHINGTON, MELODY
Address: 427 E. HENRY STREET
City-St-Zip: PUNTA GORDA, FL 33950

Title: VD
Name: HAYNES, BOOKER T JR.
Address: 512 EAST HELEN AVENUE
City-St-Zip: PUNTA GORDA, FL 33950

Title: M
Name: GRIFFITHS, DANIELLE
Address: 2226 LAKESHORE CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33952

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: EDRIS S. WILLIAMS

TD

03/03/2011

Electronic Signature of Signing Officer or Director

Date