2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005553

FILED Feb 27, 2009 Secretary of State

Entity Name: MACEDONIA MISSIONARY BAPTIST CHURCH INC. OF OSCEOLA COUNTY

Current Principal Place of Business: New Principal Place of Business: 2911 TAMPA AVENUE KISSIMMEE, FL 34744 **Current Mailing Address: New Mailing Address:** 2897 N. DIXIE HWY 2911 TAMPA AVENUE KISSIMMEE, FL 34744 KISSIMMEE, FL 34744 FEI Number: 59-3266812 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BROWN, LEONARD D 2897 N DIXIE HWY KISSIMMEE, FL 34744 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BARRINGTON, WHITFIELD Name: Name: 1809 BRACK ST Address: Address: City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: BROWN, MELVIN Name: Address: 851 BARN ST Address: City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: Title: () Delete Title: () Change () Addition DAVIS, CLARENCE Name: Name: Address: 5138 PUEBLO ST Address: City-St-Zip: ORLANDO, FL 32819 City-St-Zip: Title: () Delete Title: () Change () Addition Name: WESTON, KIM M Name: Address: 851 BARN ST Address: KISSIMMEE, FL 34744 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition BROWN, LEONARD D Name: Name: 2897 N. DIXIE HWY Address: Address: City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip:

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: LEONARD D. BROWN RA 02/27/2009