

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000003685

1. Entity Name

MACEDONIA CHURCH OF THE LIVING GOD, INC.

FILED
Mar 27, 2000 8:00 am
Secretary of State

03-27-2000 90105 013 ****61.25

Principal Place of Business	Mailing Address
826 DIXIE AVENUE LEESBURG FL 34748	903 N CHESTER ST LEESBURG FL 34748-4222 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

Zip	Country	Zip	Country
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4. FEI Number	Applied For
59-3373190	Not Applicable

5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	

6. Name and Address of Current Registered Agent
NASH, FLEETER M 136 SHENANDOAH AVENUE LADY LAKE FL 32158

7. Name and Address of New Registered Agent		
Name		
Street Address (P.O. Box Number is Not Acceptable)		
City	FL	Zip Code

8. 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 _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS	
TITLE	D ☐ Delete
NAME	SMALLEY, JUANITA
STREET ADDRESS	903 N. CHESTER STREET
CITY-ST-ZIP	LEESBURG FL 34748
TITLE	D ☐ Delete
NAME	MINCY, JOSEPH
STREET ADDRESS	36020 MAYBERRY ROAD
CITY-ST-ZIP	FRUITLAND PARK FL 34731
TITLE	D ☐ Delete
NAME	BENTLEY, CARL
STREET ADDRESS	8490 S.E. 147TH PL
CITY-ST-ZIP	SUMMERFIELD FL 34491
TITLE	D ☒ Delete
NAME	WARD, LEROY
STREET ADDRESS	POST OFFICE BOX 490571 N/A
CITY-ST-ZIP	LEESBURG FL 34491
TITLE	D ☐ Delete
NAME	WOODALL, PRISCILLA
STREET ADDRESS	15845 S.E. 80TH AVENUE
CITY-ST-ZIP	SUMMERFIELD FL 34491
TITLE	P ☐ Delete
NAME	HINES, DONALD
STREET ADDRESS	2104 WAITMAN AVENUE
CITY-ST-ZIP	LEESBURG FL 34748

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P ☒ Change ☐ Addition
NAME	Smalley, Juanita
STREET ADDRESS	903 N. Chester Street
CITY-ST-ZIP	Leesburg, FL 34748
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	V/D ☐ Change ☒ Addition
NAME	Smalley, Shelia Y.
STREET ADDRESS	4728 Spaniel Street
CITY-ST-ZIP	Orlando FL 32818
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	T/D ☒ Change ☐ Addition
NAME	Hines, Donald
STREET ADDRESS	2104 Waitman Avenue
CITY-ST-ZIP	Leesburg FL 34748

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Juanita Smalley **FILED** Smalley 3/22/00 352 326-5593
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #