## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 24, 2006 8:00 am Secretary of State

DOCUMENT # N9600003685  1. Entity Name MACEDONIA CHURCH OF THE LIVING GOD, INC.			·		04-24-2006 90343 027 ****61.25			
Principal Place of Business 1610 CRIFFIN RD LEESBURG, FL 34748		Mailing Address 1610 GRIFFIN RD LEESBURG, FL 34748	us us					NNS 51 125
2. Principal P	Place of Business	3. Mailing Address	· · · · · · · · · · · · · · · · · · ·					
Suite, Apt. #, etc.					IRICA RITLI RUJIN BUJIL RU	in bitti edike nite eter i siet e	11161 BI 1881	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			04182006	Chg-NP	CR2E037 (11/05)	
City & State		City & State			4. FEI Number 59-3373	190	<b>├</b>	pplied For ot Applicable
Zip	Country	Zip	Cour	ntry	5. Certificate of	of Status Desired	S8.75 Add	ditional
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New I	Registered Agent	
NASH FI	EETER M			Name				
NASH, FLEETER M 138 SHENANDOAH AVENUE LADY LAKE, FL 32158			Street Address		(P.O. Box Number	is Not Acceptable	le)	
			-	City			FL Zip Cod	le
8. The above	named entity submits this statement for	or the purpose of changing its	s registere	d office or registe	red agent, or both	, in the State of Fi		and accept
	tions of registered agent.		Ū	·	•			•
SIGNATURE .								
	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered	Agent signature require	d when reinstating)		DATE	
	Signature: typed or printed name of registered agent Filling Fee Is \$61.25 Due by May 1, 2006	9. Election Car Trust Fund (	mpaign Fir	nancing	\$5.00 May Be Added to Fees		DATE  Make check payable to the day department of S	
10.	Filing Fee Is \$61.25 Due by May 1, 2006 OFFICERS AND DI	9. Election Car Trust Fund (	mpaign Fir	nancing on.	\$5.00 May Be Added to Fees	Flo	lake check payable t	tate
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

MUNITH AND LONG FICER OR DIRECTOR

<u>352 - 326 - 5593</u>

Date

Daytime Phone #