

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004916

FILED
May 26, 2011
Secretary of State

Entity Name: NEW MACEDONIA MINISTRIES AND RESOURCES, INC.

Current Principal Place of Business:

502 BOONE AVE.
PAHOKEE, FL 33476

New Principal Place of Business:

Current Mailing Address:

502 BOONE AVE.
PAHOKEE, FL 33476

New Mailing Address:

FEI Number: 65-0810173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BARRETT, JOHN H
248 BANYAN AVE.
PAHOKEE, FL 33476 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: MORRISON, CARL R SR
Address: 2587 SW 14TH TER
City-St-Zip: PAHOKEE, FL 33476

Title: MD
Name: JALE, JULIA
Address: 465 FRIEND TERRACE
City-St-Zip: PAHOKEE, FL 33476

Title: VD
Name: HUNTER, BERTHA
Address: 502 BOONE AVE
City-St-Zip: PAHOKEE, FL 33476

Title: STD
Name: BROWN, JEANNIE
Address: 502 BOONE AVE.
City-St-Zip: PAHOKEE, FL 33476

Title: D
Name: PHILLIPS, ROBERT
Address: 502 BOONE AVE
City-St-Zip: PAHOKEE, FL 33476

Title: ASAT
Name: BARRETT, EFFIE
Address: 248 BANYAN AVE
City-St-Zip: PAHOKEE, FL 33476

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: CARL R. MORRISON, SR.

PD

05/26/2011

Electronic Signature of Signing Officer or Director

Date