2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000109037

Entity Name: MADISON COMMUNITY BANCSHARES CORPORATION

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
301 EAST BASE STREET MADISON, FL 32340						
Current Mailing Address:				New Mailing Address:		
301 EAST BASE STREET MADISON, FL 32340			PO BOX 834 MADISON, FL 32341			
FEI Number: 26-1236313 FEI Number Applied For () FEI Numb				nber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
MEGGS, D. EDWARD 301 EAST BASE STREET MADISON, FL 32340 US			MEGGS, D. EDWARD PRES 301 EAST BASE STREET MADISON, FL 32340 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: D. EDWARD MEGGS, SR.				04/21/2009		
Electronic Signature of Registered Agent				Date		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	SRVP () Delete PHILLIPS, HOWARD O 403 SE RAVENSWOOD WAY MADISON, FL 32340		Title: Name: Address: City-St-Zip:	ame: ddress:		
Title: Name: Address: City-St-Zip:	D () C CHERRY, ALLEN 2133 NE CATTAI MADISON, FL 32	L DRIVE		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	D () E CHERRY, CARSO P.O. BOX 218 LEE, FL 32059	Delete DN		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	D () E OZBURN, THOM 344 NE CONEFL MADISON, FL 32	AS F JR. OWER TRAIL		Title: Name: Address: City-St-Zip:	RUTHERFORD,	OOWN CREEK RD.
Title: Name: Address: City-St-Zip:	D () E HENDERSON, AL 903 NE CAYENN LEE, FL 32059			Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	D () E SCHNITKER, CL/ 1476 NE SR 6 MADISON, FL 32			Title: Name: Address: City-St-Zip:	()	Change () Addition

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HOWARD O. PHILLIPS SRVP 04/21/2009