

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001491

Entity Name: MACEDONIA MISSIONARY BAPTIST CHURCH, A DOMESTIC
NON-PROFIT CORPORATION**Current Principal Place of Business:**603 MARTIN LUTHER KING, JR. AVE.
CRESTVIEW, FL 32536**Current Mailing Address:**P. O. BOX 194
CRESTVIEW, FL 32536 US**FEI Number: 54-2145532****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BAGGETT, DWIGHT D.
603 MARTIN LUTHER KING, JR. AVE.
P.O. BOX 194
CRESTVIEW, FL 32536 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: DWIGHT D. BAGGETT****02/24/2020**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PASTOR	Title	CHAIRMAN TRUSTEE BOARD
Name	BAGGETT, DWIGHT D	Name	ALLEN, KIM
Address	1212 VALLEY RD	Address	5993 CLAYBOURNE COVE
City-State-Zip:	CRESTVIEW FL 32539	City-State-Zip:	CRESTVIEW FL 32536
Title	CHAIRMAN DEACON MINISTRY	Title	DEACON
Name	JERNIGAN, DONALD	Name	PARKER, MALCOLM
Address	6018 APALOOSA LANE	Address	5576 PINE LAKE DR.
City-State-Zip:	CRESTVIEW FL 32536	City-State-Zip:	CRESTVIEW FL 32539
Title	DEACON	Title	DEACON
Name	WHITE, J.D. JR.	Name	BRUNSON, ERNEST C
Address	925 S. MCCLELLAND ST.	Address	1213 SUNSHINE DR
City-State-Zip:	CRESTVIEW FL 32536	City-State-Zip:	CRESTVIEW FL 32539

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: ALLEN, KIM**CHAIRMAN TRUSTEE****02/24/2020**

Electronic Signature of Signing Officer/Director Detail

Date