

2019 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****02/26/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PASTOR
Name	BAGGETT, DWIGHT D
Address	1212 VALLEY RD
City-State-Zip:	CRESTVIEW FL 32539

Title	CHAIRMAN TRUSTEE BOARD
Name	ALLEN, KIM
Address	5993 CLAYBOURNE COVE
City-State-Zip:	CRESTVIEW FL 32536

Title	DEACON
Name	JERNIGAN, DONALD
Address	6018 APALOOSA LANE
City-State-Zip:	CRESTVIEW FL 32536

Title	DEACON
Name	PARKER, MALCOLM
Address	5576 PINE LAKE DR.
City-State-Zip:	CRESTVIEW FL 32539

Title	CHAIRMAN DEACON MINISTRY
Name	WHITE, J.D. JR.
Address	925 S. MCCLELLAND ST.
City-State-Zip:	CRESTVIEW FL 32536

Title	DEACON
Name	BRUNSON, ERNEST C
Address	1213 SUNSHINE DR
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: KIM ALLEN**CHAIRMAN OF TRUSTEE BOARD 02/26/2019**

Electronic Signature of Signing Officer/Director Detail

Date