

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000003508

**Entity Name:** MACEDONIA BAPTIST CHURCH OF LEE, INC.

**Current Principal Place of Business:**

5539 E US HWY 90  
LEE, FL 32859

**Current Mailing Address:**

C/O RAY L. WILLIAMS, SR.  
1207 NE CATTAIL DR  
MADISON, FL 32340

**FEI Number:** 59-2352927

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

WILLIAMS, RAY L. SR.  
1207 NE CATTAIL DR.  
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:** RAY L. WILLIAMS SR.

02/07/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DTDC  
Name WILLIAMS, RAY L. SR.  
Address C/O RAY L. WILLIAMS, SR.  
1207 NE CATTAIL DR  
City-State-Zip: MADISON FL 32340

Title D  
Name RHOADES, ALVERA W  
Address 330 NE LANTANA ST.  
City-State-Zip: LEE FL 32059

Title D  
Name MILLER, TRACI B  
Address 3195 NE JUNIPER DR  
City-State-Zip: LEE FL 32059

Title DD  
Name THOMPSON, CHRIS  
Address 1418 LONG LEAF DR.  
City-State-Zip: LIVE OAK FL 32064

Title S  
Name TUTEN, FRAN P  
Address 7221 E. HWY 90  
City-State-Zip: GREENVILLE FL 32331

Title D  
Name PICKELS, GLORIA V  
Address 1146 NE CATTAIL DR.  
City-State-Zip: MADISON FL 32340

*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:** RAY L. WILLIAMS SR

DTDC

02/07/2013

Electronic Signature of Signing Officer/Director Detail

Date