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Secretary of State

05-08-1999 90056 024 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 701100			
1. Corporation Name FREE WILL BAPTIST TEMPLE OF WINTER GARDEN, INC.			
Principal Place of Business 1208 E. STORY ROAD WINTER GARDEN FL 34787		Mailing Address 1208 E. STORY ROAD WINTER GARDEN FL 34787	
2. Principal Place of Business 21 Suite, Apt. #, etc.		2a. Mailing Address 26 Suite, Apt. #, etc.	
22 City & State		27 City & State	
23 Zip		28 Zip	
24 Country		29 Country	
25		30	
3. Date Incorporated or Qualified 06/20/1960		4. FEI Number 65-0213965	
5. Certificate of Status Desired ☐		5. Certificate of Status Desired ☐	
6. Election Campaign Financing ☐		6. Election Campaign Financing ☐	
7. Trust Fund Contribution ☐		7. Trust Fund Contribution ☐	
8. Additional Fee Required \$8.75		8. Additional Fee Required \$8.75	
9. Name and Address of Current Registered Agent MORGAN, WALTER J 278 TILDENVILLE SCHOOL RD WINTER GARDEN FL 34787		10. Name and Address of New Registered Agent 81 Name Joyce Morgan 82 Street Address (P.O. Box Number is Not Acceptable) 1003 Glensprings Ave 83 City Winter Garden FL 34787 84 Zip Code 34787	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0508, Florida Statutes.			
SIGNATURE <i>Joyce A. Morgan Sec. Treas.</i> DATE			
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE TR 1.2 NAME CRISP, CHALME 1.3 STREET ADDRESS 604 SHERWOOD OAKS CR 1.4 CITY-ST-ZIP OCOEE FL 34781		1.1 TITLE TR-D 1.2 NAME John Norris 1.3 STREET ADDRESS 1446 S. Ninth St. 1.4 CITY-ST-ZIP Winter Garden, FL 34787	
2.1 TITLE TR 2.2 NAME MORGAN, PERRY 2.3 STREET ADDRESS 331 E STORY RD 2.4 CITY-ST-ZIP WINTER GARDEN FL 34787		2.1 TITLE TR 2.2 NAME Jim Music 2.3 STREET ADDRESS 6617 Kristin Ct 2.4 CITY-ST-ZIP Orlando, FL 32818	
3.1 TITLE D 3.2 NAME ADKINS, WILLIE 3.3 STREET ADDRESS 600 CENTER ST 3.4 CITY-ST-ZIP OCOEE FL		3.1 TITLE TR 3.2 NAME Jack Powers 3.3 STREET ADDRESS 3922 Country Rose Ln. 3.4 CITY-ST-ZIP APOEKA FL 32762	
4.1 TITLE D 4.2 NAME MORGAN, WALTERS 4.3 STREET ADDRESS 278 TILDENVILLE SCHOOL ROAD 4.4 CITY-ST-ZIP WINTER GARDEN FL		4.1 TITLE TR 4.2 NAME Gerald Shappetta 4.3 STREET ADDRESS 2079 Allegany Ct. 4.4 CITY-ST-ZIP Orlando, FL 32818	
5.1 TITLE D 5.2 NAME WARD, LOUIS 5.3 STREET ADDRESS 250 TEMPLE GROVE DR 5.4 CITY-ST-ZIP WINTER GARDEN FL		5.1 TITLE TR 5.2 NAME Chris West 5.3 STREET ADDRESS 505 W. Summit St. 5.4 CITY-ST-ZIP APOEKA FL 32712	
6.1 TITLE T 6.2 NAME MORGAN, JOYCE 6.3 STREET ADDRESS 278 TILDENVILLE SCHOOL ROAD 6.4 CITY-ST-ZIP WINTER GARDEN FL		6.1 TITLE T 6.2 NAME Joyce Morgan 6.3 STREET ADDRESS 1003 Glensprings Ave 6.4 CITY-ST-ZIP Winter Garden, FL 34787	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, on an attachment with an address, with all other like empowered.

SIGNATURE:

Joyce Morgan
 SECRETARY AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joyce Morgan **May 5, 1999** **407 654-6042**
 Date Daytime Phone #

CRZE037 (1798)