

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90094 040 ****61.25

DOCUMENT # 701100

1. Entity Name

FREE WILL BAPTIST TEMPLE OF WINTER GARDEN, INC.

Principal Place of Business

Mailing Address

**1208 E. STORY ROAD
 WINTER GARDEN FL 34787**

**1208 E. STORY ROAD
 WINTER GARDEN FL 34787**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0213965

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MORGAN, JOYCE
 1003 GLEN SPRINGS AVE
 WINTER GARDEN FL 34787**

Name **JEFFERY W. SHAVER**

Street Address (P.O. Box Number is Not Acceptable)

1208 E. Story Rd.

City **Winter Garden**

FL

Zip Code
34787

8. 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 *Jeffery W. Shaver*

JEFFERY W. SHAVER PASTOR

March 11, 2002

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	TRD	☐ Delete
NAME	NORRIS, JOHN	
STREET ADDRESS	1446 S NINETH ST	
CITY-ST-ZIP	WINTER GARDEN FL 34787	
TITLE	D	☒ Delete
NAME	MORGAN, PERRY	
STREET ADDRESS	416 E BAY ST	
CITY-ST-ZIP	WINTER GARDEN FL 34787	
TITLE	D	☒ Delete
NAME	POWERS, JACK	
STREET ADDRESS	3522 COUNTRY ROSE LN	
CITY-ST-ZIP	APOPKA FL 32768	
TITLE	T	☒ Delete
NAME	MORGAN, JOYCE	
STREET ADDRESS	1003 GLENSPRINGS AVE	
CITY-ST-ZIP	WINTER GARDEN FL 34787	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D	☒ Change ☐ Addition
NAME	Norris, John	
STREET ADDRESS	1446 S Ninth St	
CITY-ST-ZIP	Winter Garden, FL 34787	
TITLE	D	☐ Change ☒ Addition
NAME	Childers, Lonnie	
STREET ADDRESS	93 Windtree Lane	
CITY-ST-ZIP	Winter Garden, FL 34787	
TITLE	T	☐ Change ☒ Addition
NAME	Hedden, Georgia	
STREET ADDRESS	1051 Sadie Lane	
CITY-ST-ZIP	Winter Garden, FL 34787	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Georgia Hedden* **RECORDED** *Georgia Hedden*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-11-02 - 407-654-3327

CR2E037 (9/01)