

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701100

FILED
May 03, 2004
Secretary of State

Entity Name: FREE WILL BAPTIST TEMPLE OF WINTER GARDEN, INC.

Current Principal Place of Business:

1208 E. STORY ROAD
WINTER GARDEN, FL 34787

New Principal Place of Business:

Current Mailing Address:

1208 E. STORY ROAD
WINTER GARDEN, FL 34787

New Mailing Address:

FEI Number: 65-0213965

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAVER, JEFFERY W
1208 E. STORY RD
WINTER GARDEN, FL 34787

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NORRIS, JOHN
Address: 1446 S NINETH ST
City-St-Zip: WINTER GARDEN, FL 34787

Title: D () Delete
Name: CHILDERS, LONNIE
Address: 93 WINDTREE LANE
City-St-Zip: WINTER GARDEN, FL 34787

Title: T () Delete
Name: HEDDEN, GEORGIA
Address: 1051 SADIE LANE
City-St-Zip: WINTER GARDEN, FL 34787

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: PETERS, DORIS
Address: 147 W STORY ROAD
City-St-Zip: WINTER GARDEN, FL 34787

Title: D () Change (X) Addition
Name: SHAVER, JEFF
Address: 1208 E STORY ROAD
City-St-Zip: WINTER GARDEN, FL 34787

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JEFF SHAVER

D

05/03/2004

Electronic Signature of Signing Officer or Director

Date