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Mar 06 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 703493 (7)

1. Corporation Name

FIRST FREE WILL BAPTIST CHURCH OF DEERFIELD BEACH,
FLORIDA, INC.

Principal Place of Business

307 S.E. 15 ST.
DEERFIELD BEACH FL 33441

Mailing Address

~~P.O. BOX 64~~
~~DEERFIELD BEACH FL 33443-0064~~
~~US~~3. Date Incorporated or Qualified
01/23/19623a. Date of Last Report
04/12/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 1427 S.E. 3rd Terrace

27 Suite, Apt. #, etc.

27 City & State

28 Deerfield Beach, Florida

29 Zip

Country

30 33441

Broward

4. FEI Number

59-2351240

Applied For

Not Applicable

5. Certificate of Status Desired

☐ NO\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ NO\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☒ Yes☐ No

9. Name and Address of Current Registered Agent

WALLEN, THOMAS G.
284 NW 40 COURT
POMPANO BEACH FL 33064

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME WALLEN, THOMAS G.
STREET ADDRESS 284 NE 40 COURT
CITY - ST - ZIP POMPANO BEACH FLTITLE ~~REV~~ ☒ DELETE
NAME ~~WILSON, BILLY R~~
STREET ADDRESS ~~1417 S.E. 3RD TERRACE~~
CITY - ST - ZIP ~~DEERFIELD BEACH FL~~TITLE TD ☐ DELETE
NAME DUNCAN, CHERYL
STREET ADDRESS 4511 NE 14 AVE
CITY - ST - ZIP POMPANO BEACH FLTITLE D ☒ DELETE
NAME ~~CLASPILLE, NORMA JEAN~~
STREET ADDRESS ~~2821 NE 10 TERR~~
CITY - ST - ZIP ~~POMPANO BEACH FL~~TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME JODY MULLINS
1.3 STREET ADDRESS 1486 N.E. 48 Court
1.4 CITY - ST - ZIP Pompano Beach, FL. 330642.1 TITLE D ☐ Change ☒ Addition
2.2 NAME RICHARD HICKS
2.3 STREET ADDRESS 2410 NE 8 Terrace-#C
2.4 CITY - ST - ZIP Pompano Beach, FL. 330643.1 TITLE D ☐ Change ☒ Addition
3.2 NAME PHILLIP MULLINS
3.3 STREET ADDRESS 1486 NE 43 CT.
3.4 CITY - ST - ZIP Pompano Beach, FL. 330644.1 TITLE D ☐ Change ☒ Addition
4.2 NAME ROBERT DUNCAN
4.3 STREET ADDRESS 4511 NE 14 Ave
4.4 CITY - ST - ZIP Pompano Beach, FL. 330645.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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 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, or on an attachment with an address.

SIGNATURE: *Thomas G. Wallen*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-02-97 (954) 941 - 0680

Date

Daytime Phone # 0043202

CR2E037 (9/96)