2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2008 08:00 AM
Secretary of State

DOCUMENT # 700932

1. Entity Name
FREE PENTECOSTAL ASSOCIATION, INC.

Principal Place of Business	Mailing Address
% REV. STEVEN R. HILL, SR. 6072 MICHELLE ROAD MACCLENNY, FL 32063	% REV. STEVEN R. HILL, SR. 6072 MICHELLE ROAD MACCLENNY, FL 32063

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02102008 No Chg-NP CR2E037 (4/06)

4. FEI Number
23-7023611

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HILL, REV. STEVEN R., SR.
6072 MICHELLE ROAD
MACCLENNY, FL 32063

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ____________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

U00000832352
02/27/08-80055-016 61.25

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HILL, REV. STEVEN R., SR
STREET ADDRESS	6072 MICHELLE ROAD
CITY-ST-ZIP	MACCLENNY, FL 320635518
TITLE	TD
NAME	WALLIN, MINNIE LEE
STREET ADDRESS	354 SW WALLIN GLEN
CITY-ST-ZIP	LAKE CITY, FL 32024
TITLE	D
NAME	HILL, MARILYN
STREET ADDRESS	6072 MICHELLE ROAD
CITY-ST-ZIP	MACCLENNY, FL 320635518
TITLE	SD
NAME	LANIA, JOSEPH
STREET ADDRESS	2561 E SARATOGA DR
CITY-ST-ZIP	COOPER CITY, FL 33026
TITLE	D
NAME	WALLIN, BILL
STREET ADDRESS	354 SW WALLIN GLEN
CITY-ST-ZIP	LAKE CITY, FL 32024
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: Steven R. Hill, Sr. STEVEN R. HILL, SR. 02-10-2008 904-259-1061
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone