

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700932

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** FREE PENTECOSTAL ASSOCIATION, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

FEI Number: 23-7023611

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

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

**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: P  
Name: HILL, REV. STEVEN R., SR  
Address: 6072 MICHELLE ROAD  
City-St-Zip: MACCLENNY, FL 320635518 US

Title: TD  
Name: WALLIN, MINNIE LEE  
Address: 354 SW WALLIN GLEN  
City-St-Zip: LAKE CITY, FL 32024 US

Title: D  
Name: HILL, MARILYN  
Address: 6072 MICHELLE ROAD  
City-St-Zip: MACCLENNY, FL 320635518 US

Title: SD  
Name: LANIA, JOSEPH  
Address: 2561 E SARATOGA DR  
City-St-Zip: COOPER CITY, FL 33026 US

Title: D  
Name: WALLIN, BILL  
Address: 354 SW WALLIN GLEN  
City-St-Zip: LAKE CITY, FL 32024 US

I hereby 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 all other like empowered.

SIGNATURE: REV. STEVEN R. HILL, SR.

PRES

04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date