

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704170

FILED
Apr 19, 2006
Secretary of State

Entity Name: FIRST FREEWILL BAPTIST CHURCH OF CHIPLEY, INC.

Current Principal Place of Business:

1387 SOUTH BLVD
CHIPLEY, FL 324289203 US

New Principal Place of Business:

Current Mailing Address:

1387 SOUTH BLVD
CHIPLEY, FL 324289203 US

New Mailing Address:

FEI Number: 59-2506313

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, GARY
1670 PEEL RD
CHIPLEY, FL 32428 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: PD () Delete
Name: CLARK, GARY
Address: 1670 PEEL RD
City-St-Zip: CHIPLEY, FL 32428

Title: SD (X) Delete
Name: STRICKLAND, BARBARA
Address: 493 FIRST ST.
City-St-Zip: CHIPLEY, FL 32428

Title: D (X) Delete
Name: OWEN, ERNEST,
Address: RT 5 BOX 302
City-St-Zip: CHIPLEY, FL 00000,

Title: STD () Delete
Name: CLARK, DONNA K
Address: 762 DALTON ST
City-St-Zip: CHIPLEY, FL 32428

Title: D () Delete
Name: SWEIGART, ED
Address: 3980 QUAIL COURT
City-St-Zip: CHIPLEY, FL 32428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: DONNA K. CLARK

STD

04/19/2006

Electronic Signature of Signing Officer or Director

Date