2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736474

FILED Jun 17, 2009 Secretary of State

Entity Name: FREEWILL HOLINESS CHURCH OF DAYTONA BEACH, INC.

Current P	rincipal Place of Business:	New Principal Place of Business:
360 CHAF DAYTONA	RLES ST. A BEACH, FL 32114	
Current M	Mailing Address:	New Mailing Address:
360 CHAF DAYTONA	RLES ST. A BEACH, FL 32114	
n accordan	r: 59-2905969 FEI Number Applied For (nce with s. 607.193(2)(b), F.S., the corporation d Address of Current Registered Ager	did not receive the prior notice.
1632 5TH DAYTONA The above	A BEACH, FL 32117 US	the purpose of changing its registered office or registered agent, or both,
SIGNATU	RE [.]	
SIGNATO		
SIGNATO	Electronic Signature of Registere	d Agent Date
		d Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
	Electronic Signature of Registere	
DFFICER Title: lame: laddress: City-St-Zip: Title: lame: laddress:	Electronic Signature of Registerer S AND DIRECTORS: S () Delete KING, JOSEPHINE 914 SCHOOL STREET	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address:
DFFICER Title: Name: Address: Dity-St-Zip: Title: Name: Address: Dity-St-Zip: Title: Name: Address: Name: Address:	Electronic Signature of Registered S AND DIRECTORS: S () Delete KING, JOSEPHINE 914 SCHOOL STREET DAYTONA BEACH, FL 32114 PD () Delete ROGERS, JANNIE LUE 1632 5TH STREET	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
OFFICER Title: Name: Address:	Electronic Signature of Registered S AND DIRECTORS: S () Delete KING, JOSEPHINE 914 SCHOOL STREET DAYTONA BEACH, FL 32114 PD () Delete ROGERS, JANNIE LUE 1632 5TH STREET DAYTONA BEACH, FL 32117 D () Delete GRANT, DAVID 1632 5TH STREET DAYTONA BEACH, FL 32117 D () Delete TILLMAN, ALLIE MAE 717 MAGNOLIA AVE.	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:

I hereby certify that the information supplied with this filing does not qualify 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: DAVID L. GRANT D 06/17/2009