

FILE NOW: FILING FEE IS \$61.25

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Mar 03 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **743165** (3)

1. Corporation Name

**ASSEMBLY OF FREE WORSHIP INCORPORATED**



Principal Place of Business	Mailing Address
12001 BIG BEND ROAD P.O. BOX 3382 RIVERVIEW FL 33569-6954	12001 BIG BEND ROAD P.O. BOX 3382 RIVERVIEW FL 33569-6954

3. Date Incorporated or Qualified	06/08/1978
4. FEI Number	59-1836019
Applied For	Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent
HOLMES, GAYLE C 8616 WICKLINE DR RIVERVIEW FL 33569

10. Name and Address of New Registered Agent
81 Name <b>Rev George R WATSON II</b>
82 Street Address (P.O. Box Number is Not Acceptable)
12214 BEGIN DRIVE
83 P.O. Box 1814
84 City <b>RIVERVIEW</b> FL 85 Zip Code <b>33569</b>

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 *Rev George R Watson II* DATE **2-12-98**

12. OFFICERS AND DIRECTORS	
TITLE	DC <input checked="" type="checkbox"/> DELETE
NAME	BATEMAN, JOE
STREET ADDRESS	12201 SHELBY DRIVE
CITY-ST-ZIP	RIVERVIEW FL
TITLE	PD <input checked="" type="checkbox"/> DELETE
NAME	HOLMES, GAYLE C
STREET ADDRESS	8616 WICKLINE DR
CITY-ST-ZIP	RIVERVIEW FL 33569
TITLE	PD <input checked="" type="checkbox"/> DELETE
NAME	HOLMES, GLEN E
STREET ADDRESS	8616 WICKLINE DR
CITY-ST-ZIP	RIVERVIEW FL
TITLE	D <input type="checkbox"/> DELETE
NAME	BURNHAM, TROY
STREET ADDRESS	12112 BAYTREE DRIVE
CITY-ST-ZIP	DOVER, FLORIDA 33527
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	MYERS, FRANKIE
STREET ADDRESS	12506 ELMORA DRIVE
CITY-ST-ZIP	RIVERVIEW FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	PD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Rev George R WATSON II
1.3 STREET ADDRESS	12214 BEGIN DR
1.4 CITY-ST-ZIP	RIVERVIEW FLA 33569
2.1 TITLE	T/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	BRUCE PASSINAULT
2.3 STREET ADDRESS	13104 Dula Drive
2.4 CITY-ST-ZIP	RIVERVIEW FLA 33569
3.1 TITLE	S/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	KARA WATSON
3.3 STREET ADDRESS	12214 BEGIN DR
3.4 CITY-ST-ZIP	RIVERVIEW FL 33569
4.1 TITLE	D Troy BURNHAM <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	12112 BAYTREE DRIVE
4.4 CITY-ST-ZIP	RIVERVIEW FL 33569
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 *Rev George R Watson II* DATE **2-12-98**

CR2E037 (10/97)