2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2008
Secretary of State

DOCUMENT# 760450

Entity Name: FREE SPIRIT COMMUNITY CHURCH, INCORPORATED

Current Principal Place of Business:

3706 E 11TH ST
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 35035
PANAMA CITY, FL 324125035 US

New Mailing Address:

FEI Number: 59-1934385 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KELLY, JAMES M.
1008 CENTER AVENUE
PANAMA CITY, FL 32402 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: KELLY, JAMES M.,
Address: 1008 CENTER AVENUE
City-St-Zip: PANAMA CITY, FL 32401 US

Title: VD ( ) Delete
Name: KELLY, MAUDENE,
Address: 1008 CENTER AVENUE
City-St-Zip: PANAMA CITY, FL 32401 US

Title: SD ( ) Delete
Name: LONG, CLAY,
Address: 1309 WISCONSIN AVENUE
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: TD ( ) Delete
Name: THOMAS, JANICE S.,
Address: 6516 ENZOR STREET
City-St-Zip: PANAMA CITY, FL 32404 US

Title: D ( ) Delete
Name: POPE, GARY
Address: 1215 LOUISIANA AVENUE
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: D ( ) Delete
Name: LONG, GLENDA
Address: 1309 WISCONSIN AVENUE
City-St-Zip: LYNN HAVEN, FL 32444 US

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:

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: JAMES M. KELLY PD 03/25/2008

Electronic Signature of Signing Officer or Director — Date