

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 01, 2005 8:00 am**  
**Secretary of State**

09-01-2005 90023 012 \*\*\*\*61.25

DOCUMENT # N02000002012

1. Entity Name

Freewill Worship Center, Inc.



**DO NOT WRITE IN THIS SPACE**

**50064439**

2. Principal Place of Business

208 W. Crown Point Rd.

3. Mailing Address

P.O.B. 771058

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Winter Garden, Fla.

City & State

Winter Garden, Fla.

4. FEI Number

32-0081146

Applied For

Not Applicable

Zip

34787

Country

USA

Zip

34777

Country

USA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name Denese Dunston

Street Address (P.O. Box Number is Not Acceptable)

1108 Mountain Way

City

Apopka

FL

Zip Code  
32703

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Denese Dunston

Signature, typed or printed name of registered agent and title if applicable.

Denese Dunston

(NOTE: Registered Agent signature required when reinstating)

8/17/05

DATE

**FEE IS \$61.25**  
**Initial or Amended UBR**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Denese Dunston 1108 Mountain Way Apopka, FL 32703
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Rubye McFarley 9906 11th Ave. Orlando, FL 32824
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Loretta Garrett Kelly 1522 Hialeah Drive Orlando, Fla., 32808 (Secretary)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Ethel Stribling 308 Magnolia St. Altamonte Springs, FL 32714
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Denese Dunston Denese Dunston

8/17/05 (407) 488-3201

CR2E037B (12/02)