

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 23, 2003 8:00 am**  
**Secretary of State**

05-05-2003 90379 001 \*\*\*\*61.25

**DOCUMENT # N02000002012**

1. Entity Name

**FREEWILL WORSHIP CENTER, INC.**



Principal Place of Business

**750 SOUTH ORANGE TRAIL STE 83  
ORLANDO FL**

Mailing Address

**625 WEST ANDERSON STREET  
ORLANDO FL 32805**

**55049686**

2. Principal Place of Business

**1605 Mercy Drive**

3. Mailing Address

Suite, Apt. #, etc.

City & State

**Orlando, Florida**

City & State

Zip

**32808**

Country

**USA**

Zip

Country

4. FEI Number

**32-0081146**

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional  
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**DUNSTON, DENESE**

**625 WEST ANDERSON STREET  
ORLANDO FL 32805**

7. Name and Address of New Registered Agent

Name **Denese Dunston**

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

**625 West Anderson Street**

City

**Orlando**

**FL**

Zip Code

**32805**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

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	DP DUNSTON, DENESE 625 W ANDERSON ST ORLANDO FL 32805	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MCFARLEY, RUBY 8908 11TH AVE ORLANDO FL 32824	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GARRETT, LORETTA 48 DORCAS CT ORLANDO FL 32811	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT STRIBLING, ETHEL 308 MAGNOLIA ST ALTAMONTE SPRINGS FL 32714	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCFARLEY, JAMES BOX 4292 ENTERPRISE FL 32725	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MCFARLEY, RUBY 1108 MOUNTAIN WAY APOPKA, FL 32703	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GARRETT, LORETTA 2102 Apartment B Orlando, FL 32805	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT CHARLES, JEAN ROBERT 6341 ROXBERG AVENUE ORLANDO, FL 32809	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ROUND TREE, CONNIE P.O. BOX 300465 Fern Park, FL 32730-0465	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**DENESE DUNSTON**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4-23-03**

**401-835-1974**

Date

Daytime Phone #

CR2E037 (10/02)

Attachment

55049086

#N020000002012

Subject: Freewill Worship Center, Inc.

Reference Number: N02000002012

To Whom It May Concern:

Attached find the updated report that was mailed from your office. Please note that the necessary corrections have been made.

Thank you for your attention in this regard.

Denese Dunston

*Denese Dunston*