

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 22, 2009
Secretary of State**

DOCUMENT# N02814

Entity Name: GREATER WILLIAM CHAPEL FREE WILL BAPTIST CHURCH, INC.

Current Principal Place of Business:

901 SW 6TH STREET
HOMESTEAD, FL 330306981

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 901249
HOMESTEAD, FL 33030 69

New Mailing Address:

FEI Number: 59-2450376 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JOHNSON, THERESA F
29420 SW 155 COURT
MIAMI, FL 33033 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: CHM () Delete
Name: JOHNSON, THERESA F
Address: 29420 SW 155 COURT
City-St-Zip: MIAMI, FL 33033

Title: O () Delete
Name: HANKERSON, JOE
Address: 901 SW 6TH STREET
City-St-Zip: HOMESTEAD, FL 33030

Title: O () Delete
Name: HOLCOMB, CARLA
Address: 901 SW 6TH STREET
City-St-Zip: HOMESTEAD, FL 33030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHM (X) Change () Addition
Name: JOHNSON, THERESA F
Address: P.O. BOX 901249
City-St-Zip: MIAMI, FL 330903 12

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: THERESA F. JOHNSON

_____ Electronic Signature of Signing Officer or Director

CHM

05/22/2009

_____ Date