NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 22, 2007 8:00 am
Secretary of State
04-26-2007 90237 018 ****61.25

DOCUMENT # N04000005970

1. Entity Name
~~Free Will Holiness Church Inc~~
Free Will holiness church inc

66016165

DO NOT WRITE IN THIS SPACE

CR2E037B (8/05)

2. Principal Place of Business	3. Mailing Address
916 oakley st.	6784 Jack horner Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Jacksonville Fla	City & State: Jacksonville Fla
Zip: 32206 Country:	Zip: 32210 Country:

4. FEI Number 562495667 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Betty G. Hall

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

6784 Jack Horner Dr.

City: Jacksonville Fla. FL Zip Code: 32210

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FEE IS $61.25
Initial or Amended AR

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	Pres	TITLE	
NAME	Rollin D. Standberry	NAME	
STREET ADDRESS	6784 Jack Horner Dr.	STREET ADDRESS	
CITY-ST-ZIP	Jacksonville Fla 32210	CITY-ST-ZIP	
TITLE	V. Pres	TITLE	
NAME	Theron Mc Daniel	NAME	
STREET ADDRESS	2285 W. 16th St	STREET ADDRESS	
CITY-ST-ZIP	Jacksonville Fla 32209	CITY-ST-ZIP	
TITLE	Sec	TITLE	
NAME	Betty G. Hall	NAME	
STREET ADDRESS	6784 Jack horner Dr.	STREET ADDRESS	
CITY-ST-ZIP	Jacksonville Fla 32210	CITY-ST-ZIP	
TITLE	Deacon	TITLE	
NAME	Shannon D. Standberry	NAME	
STREET ADDRESS	1563 W. 14th St	STREET ADDRESS	
CITY-ST-ZIP	Jacksonville Fla 32209	CITY-ST-ZIP	
TITLE	Pastor	TITLE	
NAME	Joseph Demery	NAME	
STREET ADDRESS	1207 Florida Ave.	STREET ADDRESS	
CITY-ST-ZIP	Jacksonville Fla 32206	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

DO NOT WRITE 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: Betty G. Hall Betty G. Hall Registered Agent 4-15-207 3789799
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT
Le60161G5
FN040000059 70

5-15-207
Jacksonville Fla 32218
Jack Horner Dr.

these are the Names
that we Want on Record

Thank You

Betty J. Hall
Registered agent of
Free Will Holiness Church inc
916 E. Oakley st
Jacksonville Fla 32206

Mailing adress
6784 Jack Horner Dr.
Jacksonville Fla.

You have a Check
$ 61.25