

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012794

FILED
Jan 27, 2009
Secretary of State

Entity Name: UNITED FREEWILL CHURCH, INC.

Current Principal Place of Business:

2739 DREWERY LANE
JAY, FL 32565

New Principal Place of Business:

Current Mailing Address:

2739 DREWERY LANE
JAY, FL 32565

New Mailing Address:

FEI Number: 76-0810420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, MARY
2739 DREWERY LANE
JAY, FL 32565 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: D () Delete
Name: HALL, JERRY
Address: 2361 CAMORS RD
City-St-Zip: JAY, FL 32565

Title: PD () Delete
Name: DEAN, DON
Address: 3399 FARISH RD.
City-St-Zip: JAY, FL 32565

Title: D () Delete
Name: HOWELL, ROBERT
Address: 2920 BUD DIAMOND RD.
City-St-Zip: JAY, FL 32565

Title: VPD () Delete
Name: MAGDALANY, ANDY
Address: 5885 CENTRAL SCHOOL RD.
City-St-Zip: MILTON, FL 32570

Title: T () Delete
Name: HOWELL, DIAN
Address: 2920 BUD DIAMOND RD
City-St-Zip: JAY, FL 32565

Title: S () Delete
Name: FRANCIS WILLIAMS, MARY
Address: 2739 DREWERY LANE
City-St-Zip: JAY, FL 32565

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: MAGDALANEY, ANDY
Address: 3399 FARISH RD.
City-St-Zip: JAY, FL 32565

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: HOWELL, ROBERT
Address: 5885 CENTRAL SCHOOL RD.
City-St-Zip: MILTON, FL 32570

Title: T (X) Change () Addition
Name: HOWELL, DIANE
Address: 2920 BUD DIAMOND RD
City-St-Zip: JAY, FL 32565

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: ROBERT HOWELL

VP

01/27/2009

Electronic Signature of Signing Officer or Director

Date