2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010848

FILED May 01, 2008 Secretary of State

Entity Name: FREELY FORGIVEN COMMUNITY CHURCH, INC.

Current Principal Place of Business:		New Principal Place of Bus	New Principal Place of Business:	
	NER DR. SOUTH D, FL 33810			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
P. O. BOX -AKELAN	(93517 D, FL 338043517			
n accordan	: 26-0008025 FEI Number Applied For (ice with s. 607.193(2)(b), F.S., the corporation d Address of Current Registered Age	did not receive the prior notice.	rtificate of Status Desired() Registered Agent:	
3516 MILN	CLIFFORD NER DR. SOUTH D, FL 33810 US			
	e named entity submits this statement fo e of Florida.	the purpose of changing its registered office	e or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Registere	d Agent	Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTOR	
Title: Name: Nddress: Dity-St-Zip:	PD () Delete BROWN, R. EARL P.O. BOX 92892 LAKELAND, FL 33804	Title: () Cha Name: Address: City-St-Zip:	nge()Addition	
Title: Name: Nddress: Dity-St-Zip:	VD () Delete BROWN, LINDA K P.O. BOX 92892 LAKELAND, FL 33804	Title: VD (X) Cha Name: STONES, LETITIA Address: 2450 RAMBLING O/ City-St-Zip: KISSIMMEE, FL 34		
Title: Name: Nddress: Dity-St-Zip:	ST () Delete THOMAS, CLIFFORD 3516 MILNER DR. SOUTH LAKELAND, FL 33810	Title: () Cha Name: Address: City-St-Zip:	inge () Addition	
itle:	() Delete	Title: BM () Cha Name: NEUFVILLE, ALEXA Address: 3530 DAVIS COURT City-St-Zip: VIRGINIA BEACH, V	-	
lame: Address: City-St-Zip:		only of zip. Throntin Berton, t	20.02	
ddress:	() Delete		inge (X) Addition IDING DR	

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: R.EARL BROWN PD 05/01/2008