

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010848

FILED
May 01, 2009
Secretary of State

Entity Name: FREELY FORGIVEN COMMUNITY CHURCH, INC.

Current Principal Place of Business:

3516 MILNER DR. SOUTH
LAKE LAND, FL 33810

New Principal Place of Business:

417 N. MASSACHUSETTS AVE.
LAKE LAND, FL 33801

Current Mailing Address:

P. O. BOX 93517
LAKE LAND, FL 338043517

New Mailing Address:

FEI Number: 26-0008025 **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:

THOMAS, CLIFFORD
3516 MILNER DR. SOUTH
LAKE LAND, FL 33810 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: PD () Delete
Name: BROWN, R. EARL
Address: P.O. BOX 92892
City-St-Zip: LAKE LAND, FL 33804

Title: VD () Delete
Name: STONES, LETITIA
Address: 2450 RAMBLING OAKS WAY
City-St-Zip: KISSIMMEE, FL 34746

Title: ST () Delete
Name: THOMAS, CLIFFORD
Address: 3516 MILNER DR. SOUTH
City-St-Zip: LAKE LAND, FL 33810

Title: BM () Delete
Name: NEUFVILLE, ALEXANDRIA
Address: 3530 DAVIS COURT
City-St-Zip: VIRGINIA BEACH, VA 23462

Title: BM () Delete
Name: DIXON, ANGELA
Address: 214 CAMERON LANDING DR
City-St-Zip: STOCKBRIDGE, GA 30381

Title: BM () Delete
Name: THOMAS, PATRICK
Address: 810 N. LAKE AVENUE
City-St-Zip: LAKE LAND, FL 33801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: R. EARL BROWN

PD

05/01/2009

Electronic Signature of Signing Officer or Director

Date