2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # N09011

1. Entity Name
FIRST FREE WILL BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
11605 E. U.S. HWY. 92 SEFFNER, FL 33584	11605 E. U.S. HWY. 92 SEFFNER, FL 33584

01062005 No Chg-NP CR2E037 (10/03)

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4. FEI Number
59-2250306
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

DUNCAN, RONALD
3103 N. FRITZKE RD.
DOVER, FL 33527

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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)

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	DUNCAN, RONALD
STREET ADDRESS	3103 N. FRITZKE RD.
CITY-ST-ZIP	DOVER, FL
TITLE	VD
NAME	LARKIN, ROBERT
STREET ADDRESS	1112 RIFLECREST AVE
CITY-ST-ZIP	VALRICO, FL 33594
TITLE	VD
NAME	CARLTON, DENNIS
STREET ADDRESS	7414 COMMERCE ST.
CITY-ST-ZIP	RIVERVIEW, FL 33569
TITLE	SD
NAME	LARKIN, ROBERT
STREET ADDRESS	1112 RIFLECREST AVE
CITY-ST-ZIP	VALRICO, FL 33594
TITLE	TD
NAME	RICHARDSON, JAMES D.
STREET ADDRESS	4217 TRUMAN DR.
CITY-ST-ZIP	SEFFNER, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/25/05-80089-007 70.00

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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ronald Duncan Ronald Duncan 1/09/05 813-626-5383
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #