

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N42646

1. Entity Name

FREE WILL TEMPLE OF GOD, INC.

Principal Place of Business

1543 N.E. 22ND AVE.  
OCALA FL 32671

Mailing Address

P.O. BOX 1602  
SILVER SPRING FL 34489

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3053381

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MILLS, JOE J.  
1543 N.E. 22ND AVE.  
OCALA FL 32671

7. Name and Address of New Registered Agent

Name *Barbara J. Patterson*

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

*18255 NW 60th Ave.*

City *Reddick*

FL Zip Code *32686*

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.

SIGNATURE *Barbara J. Patterson*

*Barbara J. Patterson*

*4-11-01*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME MOSELY, MIZEL  
STREET ADDRESS 1543 N.E. 22 AVE.  
CITY-ST-ZIP SILVER SPRINGS FL 34489

TITLE T ☐ Delete  
NAME MITCHELL, MARY  
STREET ADDRESS 24 SPRING LOOP CIRCLE  
CITY-ST-ZIP Ocala FL 34478

TITLE SD ☐ Delete  
NAME MILLS, JOE JR.  
STREET ADDRESS 4872 SE 110TH ST  
CITY-ST-ZIP BELLEVUE FL 34420

TITLE D ☐ Delete  
NAME WILSON, JENNIFER  
STREET ADDRESS 5400 NW 2ND ST.  
CITY-ST-ZIP Ocala FL 34482

TITLE *Barbara J. Patterson* ☐ Delete  
NAME *18255 NW 60th Ave.*  
STREET ADDRESS *Reddick, Florida 32686*  
CITY-ST-ZIP *S-T*

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
Apr 24, 2001 8:00 am  
Secretary of State

04-24-2001 90101 001 \*\*\*\*61.25

04-24-2001 90101 002 \*\*\*\*35.00

38479



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)

Attachment

# N42646  
38479

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Freewill Temple of God, Inc.  
Ref. Number: N42646

2. The mailing address of the corporation: P.O. Box 1602 Silver Spring, Md.  
34489

3. Date of incorporation/qualification: 4-11-01 Document number: N42646

4. The name and address of the current registered agent and registered office:

Joe Mills Jr.  
4872 S.E. 110th St.  
Belleview, Florida 34420

5. The name and address of the new registered agent (if changed) and /or registered office (if changed):

Barbara J. Patterson  
18255 NW 60th Ave.  
Reddick, Florida 32686

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Margaret M. Masely  
(Signature of an officer, chairman or vice chairman of the board)

4-11-01  
(Date)

Pastor and Overseer

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Pastor + Overseer Miguel M. Masely  
(Signature of Registered Agent)

4-11-01  
(Date)

If signing on behalf of an entity:

Barbara J. Patterson  
(Typed or Printed Name)

Secretary + Treasurer  
(Capacity)

\*\*\* FILING FEE: \$35.00 \*\*\*