## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9700001495 (7)

FREEDOM TEMPLE, INC.

## FILED Mar 02 1998 8:00am Secretary of State

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						[ (88/4/81 4/4 18)   1847  88/4  88/4  88/4	NEW   1981)   NEW   1218   1811   1811   1881		
Principal Place	of Business	Mailing Address				r amaistat 550 tütil angar Basat milit datil Antil	I BAKRI KIDIS DIDED IDIDI BIKI KODI		
13543 EAST HIGHWAY 50 CLERMONT FL 34711		13543 EAST HIGHWAY 50 CLERMONT FL 34711			ļ	Date Incorporated or Qualified     03/12/1997      FEI Number	Applied For		
					ĺ	59-3436081	Not Applicable		
2. Principal Place of Business		2a. Mailing Address 26				5. Certificate of Status Desired	- 60.75 and would		
Suite, Apt. #,	eic.	Suite, Apt. #, etc.				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
City & State		City & State				7. Is this nonprofit corporation a homeowners association?  Yes No			
Zip 24	Country 25	Zip 29	Cour 30	itry		<ol> <li>This corporation owes or has paid the of Personal Property Tax due June 30.</li> </ol>	current year Intangible		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
				B1	Name		· —————		
JORDAN, EDWARD P II 13543 EAST HIGHWAY 50			82	Street Address (P.O. Box Number is Not Acceptable)					
	NT FL 34711		Ĺ	B3					
					Δ1.		A 2 - 0 - 4		

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familier with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _	51	•		1/9/8	<u> </u>	
	Signature, haved or printed name of registered agent a	nd title if applicable (NOTE: F	legislered Agent signature r	<u> </u>	ATE	
12.	OFFICERS AND D		13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	DELETE	1.1 TITLE		☐ Change	Addition
NAME ]	WIGGINS, JOSEPH		1.2 NAME	<i>y</i> .		1
STREET ADDRESS	1804 CENTER STREET		1.3 STREET ADDRESS	,		
City-St-ZiP	LEEBURG FL 34749-2454		1.4 CITY - ST - ZIP			
TITLE	D	DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME	WIGGINS, CHARLENE		2.2 NAME			
STREET ADDRESS	1804 CENTER STREET		2.3 STREET ADDRESS			
CITY-ST-ZIP	LEEBURG FL 34749-2454		2.4 CITY-ST-ZIP			
TITLE	D	DEFELE	3.1 TITLE		Change	Addition
NAME	WIGGINS, FRAANK E		3.2 NAME			ŀ
STREET ADDRESS	1804 CENTER STREET		3.3 STREET ADDRESS			1
CITY-ST-ZIP	LEEBURG FL 34749-2454		3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			i
STREET ADDRESS			4.3 STREET ADDRESS	•		İ
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE	,	☐ Change	☐ Addition
NAME			5.2 NAME			ì
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			Ī
STREET ADDRESS			6.3 STREET ADDRESS			

14. 1 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

nose in the designing !!!

Feb 6, 98 352-728-8605

X2E037 (10/97