2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002946

FILED Apr 30, 2008 Secretary of State

Entity Name: FREEWILL CHRISTIAN CENTER, INC.

urrent P	rincipal Place of Bu	ısiness:	New Principal Plac	e of Business:
	189TH STREET RDENS, FL 33056	US		
urrent N	Mailing Address:		New Mailing Addre	ess:
	189TH STREET RDENS, FL 33056	US		
El Number	:: 65-0392532 FEI1	Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	d Address of Curren	t Registered Agent:	Name and Address	of New Registered Agent:
560 SOL	NVID PASTOR ITHAMPTON DRIVE R, FL 33025 US			
		s this statement for the	purpose of changing its register	red office or registered agent, or bot
the Stat	e named entity submit e of Florida.	s this statement for the	purpose of changing its register	red office or registered agent, or bot
the Stat	e named entity submit e of Florida. RE:	s this statement for the nature of Registered Ag		red office or registered agent, or bot Date
the Stat	e named entity submit e of Florida. RE:	nature of Registered Ag	ent	
the Stat IGNATU	e named entity submit e of Florida. RE: Electronic Sign	nature of Registered Ag :	ent	Date
the Stat IGNATU FFICER tle: ame: ddress:	e named entity submit e of Florida. RE: Electronic Sign S AND DIRECTORS P () Delete ELLIS, DAVID 8560 SOUTHAMPTON	nature of Registered Ag : DRIVE	ent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTO
the Stat IGNATU FFICER tle: ame: ddress: ty-St-Zip: tle: ame: ddress:	e named entity submit e of Florida. RE: Electronic Sign S AND DIRECTORS P () Delete ELLIS, DAVID 8560 SOUTHAMPTON MIRAMAR, FL 33025 VP () Delete ELLIS, ELMYRA MINIS 8560 SOUTHAMPTON	nature of Registered Ag : DRIVE STE DRIVE	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date GES TO OFFICERS AND DIRECTO () Change () Addition

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: DAVID ELLIS P 04/30/2008