

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 704854

**FILED**  
**Mar 06, 2013**  
**Secretary of State**  
**CC1985803541**

**Entity Name:** IMMANUEL FREE WILL BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

6505 NORWOOD AVE.  
JAX, FL 32208

**Current Mailing Address:**

6505 NORWOOD AVE.  
JAX, FL 32208 US

**FEI Number:** 35-2438172

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ARMES, JERRY  
4652 OAK ST.  
MACCLENNY, FL 32063 US

*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

**Officer/Director Detail :**

Title SD  
Name NOBLES, TAYLOR  
Address 7024 BERNAY AVE.  
City-State-Zip: JACKSONVILLE FL 32205

Title P  
Name CUTLER, LEROY  
Address 10561 VILANOVA RD  
City-State-Zip: JACKSONVILLE FL 32218

Title TD  
Name ARMES, JERRY  
Address 4652 OAK ST.  
City-State-Zip: MACCLENNY FL 32063

Title D  
Name CUTLER, GARY  
Address 2519 QUAIL STREET  
City-State-Zip: JACKSONVILLE FL 32218

*I hereby 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 all other like empowered.*

**SIGNATURE:** JERRY ARMES

**TD**

**03/06/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date