2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002282

Entity Name: THE FREE METHODIST FOUNDATION, INC.

Current Principal Place of Business:

8050 SPRING ARBOR ROAD SPRING ARBOR. MI 49283

Current Mailing Address:

P.O. BOX 580

SPRING ARBOR, MI 49283

FEI Number: 73-1317073 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRIST, LELAND 238 NAUTILUS WAY

TREASURE ISLAND, FL 33706 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: LELAND CRIST 02/24/2015

Electronic Signature of Registered Agent

Date

FILED Feb 24, 2015

Secretary of State

CC3702076765

Officer/Director Detail:

Title TREASURER Title DIRECTOR

NameKURTZ, DANIEL ANameCROTHERS, WILLIAM CAddress3551 TIMBER LANE DRIVEAddress12405 E. POTTER RDCity-State-Zip:JACKSON MI 49203City-State-Zip:DAVISON MI 48423

Title DIRECTOR Title DIRECTOR

NameKILLINGER, PAUL RNameMOSES, VICTOR CAddress611 W. SUVANNA CT.Address1521 SECOND AVE
APT 2304

City-State-Zip: DUNLAP IL 61525

City-State-Zip: SEATTLE WA 98101

Title PRESIDENT Title VC

Name KEENE, GENE E Name COLLINS, EVAN R
Address 7200 SANCTUARY DRIVE

Address 302 ALSTON RD

City-State-Zip: JACKSON MI 49201 City-State Zip: SANTA BARRARA CA 23405

City-State-Zip: JACKSON MI 49201 City-State-Zip: SANTA BARBARA CA 93108

Title DIRECTOR Title SECRETARY

Name POTEAT, GWENDOLYN M Name TOY, CHARLES R

Address 100 THREE OAKS DRIVE Address 5023 RIVER RIDGE DRIVE

City-State-Zip: MIDWEST CITY OK 73130 City-State-Zip: LANSING MI 48917

Continues on page 2

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: DANIEL A KURTZ TREASURER 02/24/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title CHAIRMAN

Name THOMAS, MATTHEW A Name GOODNIGHT, DAVID

Address 16926 N. SANDS RD Address 4911 228TH SE

City-State-Zip: MEAD WA 99021 City-State-Zip: BOTHELL WA 98021

Title DIRECTOR Title DIRECTOR

NameGANTON, LLOYDNameROBERTS, LARRYAddress7373 CARTER RDAddress7619 BALLINSHIRE N

City-State-Zip: SPRING ARBOR MI 49283 City-State-Zip: INDIANAPOLIS IN 46254