

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003853

Entity Name: ST. CHRISTOPHER'S METAPHYSICAL TEMPLE, INC.

Current Principal Place of Business:

13588 TAMIAMI TRAIL
NORTH PORT, FL 34287

Current Mailing Address:

13588 TAMIAMI TRAIL
NORTH PORT, FL 34287

FEI Number: 26-4175828

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HASELEY, MARCIA
13588 TAMIMI TRAIL
NORTH PORT, FL 34287 US

FILED
Apr 30, 2014
Secretary of State
CC6912756286

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 D
Name HASELEY, MARCIA
Address 13588 TAMIMI TRAIL
City-State-Zip: NORTH PORT FL 34287

Title D
Name WILSON, LORIAL A
Address 13588 TAMIMI TRAIL
City-State-Zip: NORTH PORT FL 34287

Title DIRECTOR
Name LISA, LIVERPOOL
Address 13588 TAMIAMI TRAIL
City-State-Zip: NORTH PORT FL 34287

Title DIRECTOR
Name SANDRA, WEE TOM
Address 13588 TAMIAMI TRAIL
City-State-Zip: NORTH PORT FL 34287

Title DIRECTOR
Name CHRISTINA, PETERS
Address 13588 TAMIAMI TRAIL
City-State-Zip: NORTH PORT FL 34287

Title DIRECTOR
Name DOZIER HENRY, O'ARE PHD
Address 13588 TAMIAMI TRAIL
City-State-Zip: NORTH PORT FL 34287

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: MARCIA HASELEY

04/30/2014

Electronic Signature of Signing Officer/Director Detail

Date