

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001068

Entity Name: THRIVE METROPOLITAN COMMUNITY CHURCH OF
TALLAHASSEE, INC.**FILED**
Mar 25, 2017
Secretary of State
CC1178278224**Current Principal Place of Business:**2720 APALACHEE PKWY.
#10
TALLAHASSEE, FL 32301-3636**Current Mailing Address:**P.O. BOX 721
TALLAHASSEE, FL 32302 US**FEI Number: 59-3431642****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**JONI, TRICKEY
8057 ARCHER CIRCLE
TALLAHASSEE, FL 32309 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: JONI TRICKEY****03/25/2017**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VICE MODERATOR
Name	HICKS, THOMAS L
Address	300 S. DUVAL STREET #2005
City-State-Zip:	TALLAHASSEE FL 32301

Title	CLERK
Name	TRICKEY, JONI
Address	8057 ARCHER CIRCLE
City-State-Zip:	TALLAHASSEE FL 32309

Title	TREASURER
Name	MACDONELL, MARCY L
Address	1007 CAP TRAM ROAD
City-State-Zip:	TALLAHASSEE FL 32317

Title	MEMBER AT LARGE
Name	MARSHALL, KADELL
Address	371 HILLTOP DRIVE
City-State-Zip:	MIDWAY FL 32343

Title	MEMBER AT LARGE
Name	TEMPLES, CHRISTY
Address	740 ALICE WESTER DR.
City-State-Zip:	TALLAHASSEE FL 32310

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: JONI TRICKEY**CLERK****03/25/2017**

Electronic Signature of Signing Officer/Director Detail

Date