2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705565

FILED Apr 05, 2009 Secretary of State

Entity Name: HARMONY METAPHYSICAL CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 2517 W. HENRY AVENUE TAMPA, FL 33614 **Current Mailing Address: New Mailing Address:** 2517 W. HENRY AVENUE TAMPA, FL 33614 FEI Number: 59-6173184 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GUERRA, DONNA JEANNE 2519 W HENRY AVE TAMPA, FL 33614 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES PRES** (X) Change () Addition () Delete GUERRA, MARIO REV Name: GUERRA, MARIO REV Name: 2606 W. HENRY AVE. Address: 2519 W. HENRY AVE. Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: TAMPA, FL 33614 Title: () Delete Title: () Change () Addition PEDROSA, REV. SHEILA Name: Name: Address: 419 W PARK AVE Address: City-St-Zip: TAMPA, FL 33602 19 City-St-Zip: Title: TRS () Delete Title: (X) Change () Addition GUERRA, DONNA J REV GUERRA, DONNA J REV Name: Name: 3028 SUNSET VISTA DRIVE. Address: Address: 2519 W. HENRY AVE City-St-Zip: SPRING HILL, FL 34607 City-St-Zip: TAMPA, FL 33614 Title: TD () Delete Title: () Change () Addition Name: PIERCE, HARRY MIT Name: 707 W. HENRY AVE Address: Address: City-St-Zip: TAMPA, FL 33604 City-St-Zip: Title: () Delete Title: (X) Change () Addition ESTEVEZ, STEPHEN D MIT HUMBERTSON, DEBRA K MIT Name: Name: 2606 W. HENRY AVE 8020 N. GOMEZ Address: Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: TAMPA, FL 33614 Title: (X) Delete Title: () Change () Addition HUMBERTSON, DEBRA K MIT Name: Name: Address: 2603 W. HENRY AVE Address: TAMPA, FL 33614 City-St-Zip: City-St-Zip:

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: DONNA JEANNE GUERRA TRS 04/05/2009