

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 APR 19 AM 6:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # 712639 (4)**  
1. Corporation Name  
**CHURCH OF METAPHYSICAL CHRISTIANITY, INC.**

Principal Place of Business Mailing Address  
**2717 BROWNING STREET SARASOTA FL 34237**

2. Principal Place of Business 2a. Mailing Address  
21 26  
22 27  
23 28  
24 25 29 30

DO NOT WRITE IN THIS SPACE  
3. Date Incorporated or Qualified **04/21/1967** 3a. Date of Last Report **01/27/1994**  
4. FEI Number **59-6169981** Applied For Not Applicable  
5. Certificate of Status Desired  **\$0.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  **\$68.75 Supplemental Fee Not Required**  
8. This corporation has liability for intangible tax under S. 199.052, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
**REV. DOROTHY G. FLEXER  
2717 BROWNING ST.  
SARASOTA FL 34237**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DARLING, ANN	12 NAME	D
STREET ADDRESS	1229 SEA PLUME WAY	13 STREET ADDRESS	SALLY B. BARROWS
CITY - ST - ZIP	SARASOTA FL 34242-2647	14 CITY - ST - ZIP	6313 MOSBY PL SARASOTA FL 34231 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	V	21 TITLE	D
NAME	BRUNSON, CAROLYN	22 NAME	HAROLD F FULTZ
STREET ADDRESS	4937 SILK OAK DR	23 STREET ADDRESS	4521 DEER RIDGE PL
CITY - ST - ZIP	SARASOTA FL 34232-5407	24 CITY - ST - ZIP	SARASOTA FL 34233-1707 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	S	31 TITLE	D
NAME	COURTNEY, C JEAN	32 NAME	LYNDA FERDINANDO
STREET ADDRESS	3508 MNEOLA DR	33 STREET ADDRESS	6121 NICOLE DR
CITY - ST - ZIP	SARASOTA, FL 00000 34239-6325	34 CITY - ST - ZIP	SARASOTA FL 34243 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	T	41 TITLE	
NAME	FLEXER, DOROTHY	42 NAME	
STREET ADDRESS	2717 BROWNING ST	43 STREET ADDRESS	
CITY - ST - ZIP	SARASOTA, FL 00000 34237-	44 CITY - ST - ZIP	
TITLE	P	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NEWMAN, THOMAS	52 NAME	IDA DAISLEY
STREET ADDRESS	2632 ARDENORVE 4484 GOLDEN LAKES	53 STREET ADDRESS	2656 MARTIN ST.
CITY - ST - ZIP	SARASOTA, FL 00000 34233	54 CITY - ST - ZIP	SARASOTA FL 34237
TITLE	D	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLACK, SHELBY	62 NAME	
STREET ADDRESS	1813 WOOD HOLLOW CT	63 STREET ADDRESS	
CITY - ST - ZIP	SARASOTA FL #5097	64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the recorder or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jean C. Courtney  
JEAN C. COURTNEY AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
4-09-95 (813) 955-1251  
Jean C. Courtney, Secy.