2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2002 8:00 am
Secretary of State
02-21-2002 90042 007 ****61.25

DOCUMENT # 731986

1. Entity Name

METROPOLITAN MINISTRIES, INC.

927945

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
2002 N. FLA. AVENUE TAMPA FL 33602	2002 N. FLA. AVENUE TAMPA FL 33602

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1477007 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HUEY, MARK 2002 NORTH FLORIDA AVENUE TAMPA FL 33602	Name: KARLEEN KOS Street Address (P.O. Box Number is Not Acceptable): 2002 NORTH FLORIDA AVENUE City: TAMPA FL Zip Code: 33602

8. 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: Karleen Kos 02-04-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD SHOBE, DAVID C 501 E.KENNEDY BLVD # 1700 TAMPA FL 33602	☑ Delete	CD HARRELL, C. STAN 3225 SOUTH MACDILL AVENUE, STE. 126-255 TAMPA FL 33629	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ELLIS, JOEL M 15100 CONTOY PLACE TAMPA FL 33618	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD OTTE, MARSHA 945 SEDDON COVE WAY TAMPA FL 33602	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EVP HUEY, MARK 2002 NORTH FLORIDA AVENUE TAMPA FL 33602	☑ Delete	EVP KOS, KARLEEN 2002 NORTH FLORIDA AVENUE TAMPA FL 33602	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Karleen Kos SIGNATURE REQUIRED 02-04-02 813-209-1000