

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739645

FILED  
Apr 16, 2007  
Secretary of State

**Entity Name:** METROPOLITAN CATHEDRAL OF TRUTH, INC.

**Current Principal Place of Business:**

1110 RICHBAY ROAD  
HAVANA, FL 32333 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3251  
TALLAHASSEE, FL 32315 US

**New Mailing Address:**

**FEI Number:** 59-1949767

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BARRINGTON, MALCOLM K  
6245 HINES HILL CIRCLE  
TALLAHASSEE, FL 32312 US

**Name and Address of New Registered Agent:**

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:**

Title: D ( ) Delete  
Name: LYONS, LEE  
Address: 4345 COOL EMERALD DRIVE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: D ( ) Delete  
Name: SIMMONS, GARRY  
Address: 3474 GARDENVIEW WAY  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: SIMMONS, DOROTHY  
Address: 3474 GARDENVIEW WAY  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: BARRINGTON, MICHAEL K  
Address: 2300 WEST INDIANHEAD  
City-St-Zip: TALLAHASSEE, FL

Title: TD ( ) Delete  
Name: ROBINSON, DEBORAH L  
Address: P.O. BOX 3986  
City-St-Zip: TALLAHASSEE, FL 32315

Title: S ( ) Delete  
Name: CLAYTON, MARY  
Address: 1906 CROYDON DRIVE  
City-St-Zip: TALLAHASSEE, FL 32310

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBORAH L. ROBINSON

TD

04/16/2007

Electronic Signature of Signing Officer or Director

Date