

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jan 21, 2009
Secretary of State

DOCUMENT# 767960

Entity Name: METROPOLITAN COMMUNITY CHURCH KEY WEST, INC.

Current Principal Place of Business:

1215 PETRONIA STREET
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

1215 PETRONIA STREET
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 23-0794543 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCMURRAY, JOSEPH REV
1215 PETRONIA STREET
KEY WEST, FL 33040 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: P () Delete
Name: MCMURRAY, JOSEPH REV
Address: 1215 PETRONIA STREET
City-St-Zip: KEY WEST, FL 33040

Title: V () Delete
Name: GORDON, VICKI
Address: 1215 PETRONIA
City-St-Zip: KEY WEST, FL 33040

Title: D () Delete
Name: HINAND, ALLEN
Address: 1215 PETRONIA
City-St-Zip: KEY WEST, FL 33040

Title: T () Delete
Name: CARLILE, SANDEE
Address: 1215 PETRONIA ST
City-St-Zip: KEY WEST, FL 33040

Title: D () Delete
Name: LOHR, SHERI
Address: 1215 PETRONIA
City-St-Zip: KEY WEST, FL 33040

Title: D () Delete
Name: HERNANDEZ, JOHN
Address: 1215 PETRONIA
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: FUHRIMAN, SCOTT
Address: 1215 PETRONIA
City-St-Zip: KEY WEST, FL 33040

Title: T (X) Change () Addition
Name: CARLILE, SANDRA
Address: 1215 PETRONIA ST
City-St-Zip: KEY WEST, FL 33040

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 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: SANDRA CARLILE

T

01/21/2009

Electronic Signature of Signing Officer or Director

Date