

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000003202

FILED
May 13, 2002 8:00 AM
Secretary of State

Entity Name: TRI-CITY METRO CHURCH, INC.

Current Principal Place of Business:

9404 CHESAPEAKE DRIVE
BRENTWOOD, TN 37027 US

New Principal Place of Business:

Current Mailing Address:

9404 CHESAPEAKE DRIVE
BRENTWOOD, TN 37027 US

New Mailing Address:

FEI Number: 59-3648127 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENLEY, LARRY SR
18002 CLEAR LAKE DRIVE
LUTZ, FL 33549

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: PD () Delete
Name: HIGGINS, JAMES A
Address: 9404 CHESAPEAKE DRIVE
City-St-Zip: BRENTWOOD, TN 37027

Title: VD () Delete
Name: HIGGINS, DEBI
Address: 9404 CHESAPEAKE DRIVE
City-St-Zip: BRENTWOOD, TN 37027

Title: D () Delete
Name: HENLEY, LARRY SR.
Address: 18002 CLEAR LAKE DRIVE
City-St-Zip: LUTZ, FL 33549

Title: D () Delete
Name: MEARES, DON
Address: 12606 LONGWATER DRIVE
City-St-Zip: MITCHELLVILLE, MD 20721

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DEBI HIGGINS

VD

05/13/2002

Electronic Signature of Signing Officer or Director

_____ Date