

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09191

FILED
Apr 18, 2007
Secretary of State

Entity Name: METRO LIFE CHURCH OF GREATER ORLANDO, INC.

Current Principal Place of Business:

910 S. WINTER PARK DR
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

910 S. WINTER PARK DR
CASSELBERRY, FL 32707

New Mailing Address:

FEI Number: 59-2521307

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, DANIEL D.
910 S. WINTER PARK DR.
CASSELBERRY, FL 32707 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: PD () Delete
Name: JONES, DANIEL D.,
Address: 4145 TALL TREE DRIVE
City-St-Zip: ORLANDO, FL 32810

Title: SD () Delete
Name: TWINING, TODD
Address: 972 ENGLISH TOWN LANE #100
City-St-Zip: WINTER SPRINGS, FL 32708

Title: TD () Delete
Name: CHEW, CLAUDE C., III,
Address: 430 COLUMBUS CIRCLE
City-St-Zip: LONGWOOD, FL 32750

Title: VD () Delete
Name: PHILLIPS, BENNY
Address: 739 ROSALIE WAY
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: TWINING, TODD
Address: 125 BELLA ROSA CIRCLE
City-St-Zip: SANFORD, FL 32771

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: CLAUDE C. CHEW

TD

04/18/2007

Electronic Signature of Signing Officer or Director

Date