2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Apr 21, 2005 8:00 am Secretary of State **DOCUMENT # N16917** 04-21-2005 90220 014 ****61.25 SPIRIT OF LIFE METROPOLITAN COMMUNITY CHURCH, Mailing Address Principal Place of Business 4133 THYS RD P.O. BOX 854 ELFERS, FL 34680 US NEW PORT RICHEY, FL 34653 2. Principal Place of Business 3. Mailing Address Suite Apt # etc. Suite, Apt. #, etc. 01102005 CR2E037 (10/03) Applied For 4. FEI Number 59-3322340 City & State City & State Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHAMBROOK, DOREEN REV. Street Address (P.O. Box Number is Not Acceptable) 280 TROPIC BLVD. EAST LARGO, FL 33770 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Stonature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make check payable to Filing Fee is \$61.25 Due by May 1, 2005 Trust Fund Contribution. Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE ☐ Change ■ Addition SHAMBROOK, DOREEN REV. NAME NAME STREET ADDRESS 280 TROPIC BLVD, EAST STREET ADDRESS CITY-ST-ZIP LARGO, FL 33770 CITY-ST-ZIP Clerk TITLE Delete TITLE ☐ Change ☐ Addition PAYNE, JAMES L. 4256 Rudder WAY NORMAN, WILLIAM H NAME 11447 TURTLE DOVE PLACE STREET ADDRESS STREET ADDRESS New Abrt Richey, Fl. 34652 NEW PORT RICHEY, FL 34654 CITY-ST-ZIP CITY-ST-ZIP BOOKKEEPER Delete TITLE TITLE ☐ Change ☐ Addition Bowlyow, RONALD HARRISON, RICHARD NAME NAME 1217 Ambrose Court STREET ADDRESS 38050 WOODGATE LANE STREET ADDRESS City-St-ZIP ZEPHYRHILLS, FL 33524 spring Hill, Fl. 34608 CITY-ST-ZP TITLE ☐ Delete TITLE ☐ Change Addition CALHOUN, SHARON L NAME NAME 3021 DOTHAN AVE. STREET ADDRESS STREET ADDRESS SPRING HILL, FL 34609 CITY-ST-ZIP CITY-ST-7IP Vice Moderator TITLE VM Delete TITLE Change ☐ Addition COOK, HOWARD L. BURKE, KAREN 7100 ULMERTON ROAD LOT 725 NAME 12406 COBBLESTONE DR STREET ADDRESS STREET ADDRESS LARGO, 1-1. 33771 CITY-ST-ZIP HUDSON, FL 34667 CITY-ST-7/P TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME

FILED

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.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PR CALHOUN (alhour) ShArON L. JAN. 11, 2005 (727)849-6962 SIGNATURE INTED NAME OF SIGNING OFFICER OR DIRECTOR