

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16917

FILED
Mar 22, 2010
Secretary of State

Entity Name: SPIRIT OF LIFE METROPOLITAN COMMUNITY CHURCH, INC.

Current Principal Place of Business:

4133 THYS RD
NEW PORT RICHEY, FL 34653 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 854
ELFERS, FL 34680 US

New Mailing Address:

FEI Number: 59-3322340

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASON, BEV
17050 NELSON ROAD
SPRING HILL, FL 34610 US

Name and Address of New Registered Agent:

CONNOLLY, NOREEN
9970-2 EAGLES POINT CIRCLE
PORT RICHEY, FL 34680 US

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: NOREEN CONNOLLY

03/22/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: KIMBALL, DEBBIE J
Address: 8832 LIDO LANE
City-St-Zip: PORT RICHEY, FL 34668 US

Title: TREA
Name: CONNOLLY, NOREEN
Address: 9970 - 2- EAGLES PT. CIR
City-St-Zip: PORT RICHEY, FL 34668 US

Title: VM
Name: MASON, BEV S
Address: 17050 NELSON ROAD
City-St-Zip: SPRING HILL, FL 34610

Title: ADMI
Name: LEIFHEIT, RODNEY
Address: 13822 SAND OAK COURT
City-St-Zip: HUDSON, FL 34669

Title: D
Name: BURKE, KELLY
Address: 5203 MANOR DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34652

I hereby 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 all other like empowered.

SIGNATURE: NOREEN CONNOLLY

TREA

03/22/2010

Electronic Signature of Signing Officer or Director

Date