

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20563

FILED
Jan 29, 2008
Secretary of State

Entity Name: METROPOLITAN COMMUNITY CHURCH OF THE PALM BEACHES, INC.

Current Principal Place of Business:

4857 NORTHLAKE BLVD.
WEST PALM BEACH, FL 33418

New Principal Place of Business:

Current Mailing Address:

4857 NORTHLAKE BLVD.
WEST PALM BEACH, FL 33418 US

New Mailing Address:

4857 NORTHLAKE BLVD.
WEST PALM BEACH, FL 33418

FEI Number: 41-2025538

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FINLEY, ROBERT L
690 ATLANTIS ESTATES WAY
ATLANTIS, FL 33462 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: VM () Delete
Name: FINLEY, ROBERT L
Address: 690 ATLANTIS ESTATES WAY
City-St-Zip: ATLANTIS, FL 33462

Title: SEC () Delete
Name: LITTLE, KAREN E
Address: 340 W 32ND ST
City-St-Zip: RIVIERA BEACH, FL 33404

Title: TRES () Delete
Name: RICHARDS, JOHN P
Address: 1111 GREEN PINE BLVD #F-3
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D () Delete
Name: ELLSWORTH, LUANN
Address: 6159 FOSTER STREET
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: PARROT, WILLIAM
Address: 2205 SW OLYMPIC CLUB TERRACE
City-St-Zip: PALM CITY, FL 34996

Title: D () Delete
Name: MILLER, LORING A
Address: 1826 N. DIXIE HWY #2
City-St-Zip: LAKE WORTH, FL 33460

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VM (X) Change () Addition
Name: ELLSWORTH, LUANN
Address: 6159 FOSTER STREET
City-St-Zip: JUPITER, FL 33458

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

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

Title: D (X) Change () Addition
Name: FINLEY, ROBERT L
Address: 690 ATLANTIS ESTATES WAY
City-St-Zip: ATLANTIS, FL 33462

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: ROBERT L. FINLEY

D

01/29/2008

Electronic Signature of Signing Officer or Director

Date