2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 27, 2004
Secretary of State

DOCUMENT# N27685

Entity Name: METRO CHURCH OF CHRIST, INC.

Current Principal Place of Business:

281 DIVISION ST
OVIEDO, FL 32765 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 621966
OVIEDO, FL 327621966 US

New Mailing Address:

FEI Number: 59-2847190 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MUTH DAVID C
1937 KIMBRACE PLACE
WINTER SPRINGS, FL 32792 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: WASHBURN, VICTOR
Address: 388 LAKE PARK TRAIL
City-St-Zip: OVIEDO, FL 32765

Title: SD ( ) Delete
Name: MUTH, DAVID C
Address: 1937 KIMBRACE PLACE
City-St-Zip: WINTER PARK, FL 32792

Title: VD ( ) Delete
Name: GERBER, BERT
Address: 123 DEW DROP LANE
City-St-Zip: CASSELBERRY, FL 32707

Title: TD ( ) Delete
Name: LEE, RICK
Address: 1490 AVALON BLVD
City-St-Zip: CASSELBERY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: WASHBURN, VICTOR
Address: 117 JANE CREEK RD
City-St-Zip: GENEVA, FL 32732

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

Title: VD (X) Change ( ) Addition
Name: GERBER, BERT
Address: 936 SAZA RUN
City-St-Zip: CASSELBERRY, FL 32707

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: DAVID C MUTH SD 08/27/2004

Electronic Signature of Signing Officer or Director Date