2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Sep 07, 2007 DOCUMENT# N27685 Secretary of State

Entity Name: METRO CHURCH OF CHRIST, INC.

Current Principal Place of Business: New Principal Place of Business: 1491 E STATE RD 434 STE 101 WINTER SPRINGS, FL 32708 US **New Mailing Address: Current Mailing Address:** 1491 E STATE RD 434 STE 101 WINTER SPRINGS, FL 32708 US FEI Number: 59-2847190 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MUTH DAVID C 1937 KIMBRACE PLACE WINTER SPRINGS, FL 32792 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WASHBURN, VICTOR Name: Name: 113 JANE CREEK RD Address: Address: City-St-Zip: GENEVA, FL 32732 City-St-Zip: Title: SD () Delete Title: () Change () Addition MUTH, DAVID C Name: Name: Address: 1937 KIMBRACE PLACE Address: City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: Title: VD. () Delete Title: () Change () Addition GERBER, BERT Name: Name: Address: 936 SAZA RUN Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: Title: TD () Delete Title: TD (X) Change () Addition LEE, RICK Name: Name: LEE, RICARDO 1490 AVALON BLVD Address: Address: 1490 AVALON BLVD City-St-Zip: CASSELBERY, FL 32707 City-St-Zip: CASSELBERY, FL 32707 Title: (X) Delete Title: () Change () Addition COX, RICK Name: Name: 117 JANE CREEK RD Address: Address: City-St-Zip: GENEVA, FL 32732 City-St-Zip: Title: () Delete Title: () Change () Addition WALKER, KIRK Name: Name: Address: 1140 SHADY PALM COVE Address: OVIEDO, FL 32765 City-St-Zip: 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: DAVID MUTH SD 09/07/2007