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May 09 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N27751 (9)

1. Corporation Name
CHURCH OF THE TRINITY, METROPOLITAN COMMUNITY CHURCH, INC.



Principal Place of Business 7225 N LOCKWOOD RIDGE RD SARASOTA FL 34243	Mailing Address 7225 N LOCKWOOD RIDGE RD SARASOTA FL 34243-4526
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3. Date Incorporated or Qualified 08/04/1988	3a. Date of Last Report 05/16/1996
4. FEI Number 23-7094543	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	30

9. Name and Address of Current Registered Agent

**KEIN, REV. G
7225 N. LOCKWOOD RIDGE RD.
SARASOTA FL 34243**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> DELETE
NAME	DEMARCO, LOU J
STREET ADDRESS	6101 - 34TH ST. W. #12G
CITY-ST-ZIP	BRADENTON FL
TITLE	D <input type="checkbox"/> DELETE
NAME	CLAYTON, SUE
STREET ADDRESS	6024 - 28TH ST. W.
CITY-ST-ZIP	BRADENTON FL
TITLE	D <input type="checkbox"/> DELETE
NAME	CRAWFORD, RON
STREET ADDRESS	3034 - 59TH ST.
CITY-ST-ZIP	SARASOTA FL
TITLE	D <input type="checkbox"/> DELETE
NAME	MRAZIK, MICHAEL
STREET ADDRESS	6731 WASHINGTON PLACE
CITY-ST-ZIP	BRADENTON FL
TITLE	C <input type="checkbox"/> DELETE
NAME	MILLER, VICKIE
STREET ADDRESS	1408V 37TH ST. CT. W.
CITY-ST-ZIP	BRADENTON FL
TITLE	D <input type="checkbox"/> DELETE
NAME	FISHER, LINDA
STREET ADDRESS	2698 - 60TH AVE. TERR. W.
CITY-ST-ZIP	BRADENTON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13, unchanged, or on an attachment with an address.

CR2E037 (9/96)

SIGNATURE _____ 11/6/97